

Chemist & Druggist

3 March 1973

THE NEWSWEEKLY FOR PHARMACY



Flourishing industry... birds-eye view

Mentha Piperita

In the rich fertile acres of Ransom's farmlands, scores of medicinal and essential-oil bearing plants thrive to perfection under the devoted skill of specialist scientists. Processed and assayed with the same meticulous care in Ransom's laboratories, these plants yield superb products that fill the galenical warehouses of the world. Ransom's can also process your own materials, to conserve your capital and reduce your overheads—all in the strictest confidence. Ransom's is an entirely self-contained business, unconnected with any other firm in the industry.



Established 1846

William Ransom & Son Ltd.,
HITCHIN HERTFORDSHIRE ENGLAND

Beauty Business

HAIR COLOURANTS
SUPPLEMENT

NPU seeks tax rebate concession

Oral contraception review

"No chemist can afford to carry stock that doesn't sell."

That's always been true. But when VAT comes in it's going to be essential.

We don't need to tell you why. Instead we'll tell you how you can avoid the problem.

A comprehensive range of products.

Lilia-White has a range of six heavily advertised and regularly promoted brands. A range that's comprehensive enough to meet the requirements of every one of your customers buying external sanitary protection.

With a range of top-sellers like this (almost 7 out of 10 towels sold are ours), why carry more stock than you need?

A pre-VAT moneysaver.

There's also another way we can save you money that we think you should know about. Place your order before VAT and you'll get a substantial discount from your wholesaler or our representative.

All in all, we think that's quite a good proposition: save money now, make money later.

Most women trust Lilia-White for their sanitary protection.

Dr. White's. They account for half of all towels sold in Britain.

Panty Pads, the new super slim towels which fix inside panties, with their own adhesive strips.

Lilia, Britain's most popular disposable towel.

Koronet, clever absorbent towels that fit in their own stretch briefs.

Carefree, the extra comfortable disposable towel.

Fastidia. Mini Pads for everyday personal freshness.

3 March 1973 Vol. 199 No. 4850

The newswweekly for pharmacy

114th year of publication

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Benn

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Northern Ireland

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Mr P. S. Collier reviews current
knowledge on oral contraceptives
(see p270)

Don't let anyone fool you about footsprays

**Scholl are clear brand leaders
in pharmacy with over 60% of the market**
(the runner-up is way behind with only 14%)



stock the brand leaders

'Extend tax rebate deadline'—NPU

Chemists' difficulty in submitting accurate stock figures for purchase tax rebate by April 30, has been drawn to the attention of the Chancellor of the Exchequer by the National Pharmaceutical Union.

A letter to Mr Barber, signed by Mr J. Wright, NPU secretary, suggests that chemists are unique among independent retailers.

"They are required to carry an unusually wide inventory of surgical and medicinal lines, and they also carry a large number of separate tax-bearing items in their cosmetic, toiletry and photographic stocks. Mainly because of the wide and varied nature of their inventory, chemists do not, generally speaking, do their own stock-taking. They rely on one of the several firms specialising in stock valuation to arrive at a figure for their annual accounts.

"An additional difficulty is that proprietor pharmacists have a statutory duty to exercise personal supervision over the dispensing of prescriptions and the sale of medicines. Because of this, the time available to them for stock-taking, book-keeping and other ancillary activities is far more limited than is the case with other retailers.

Stocktaking problems

"It is for these reasons that many of our members have arranged to be visited by stock-takers during February or March of this year. Stock-takers are thus faced with far more work than they would normally have, at what is, in any event, their busiest period, and whilst they should be able to carry out the stock counting process, the major firms have told us that they cannot produce the figures that our members will need to reclaim their purchase tax in time for the making of claims by April 30.

"Representatives of the NPU and of two of the major stock-taking firms met Customs officers recently to outline this problem and to seek an extension of the time limit. As usual, we were met with courtesy and heard sympathetically.

"We appreciate the need to control the rebate scheme and to ensure that there are sufficient safeguards to protect the Revenue. We also understand why Customs wish to complete the rebate checks before the first quarterly VAT returns arrive in July. But we do not see that an extension of the time limit up to the end of June would in any way interfere with the "policing" of the system if a condition were imposed that any claims received after April 30 must be supported by a stock certificate signed by an accredited stock valuer. On the contrary, the availability of independent stock certificates should increase the accuracy of the figures and the ease with which they can be verified. Moreover, those chemists (most of whom will be repayment traders) who sub-

mit claims later than April will be delaying the payment of the rebate and this cannot be something to which the Revenue would object.

"Our members will undoubtedly be adversely affected if the April "deadline" is not altered and I do therefore trust that you will find it possible to grant this concession."

DDSA and Berk lose patent appeal

Appeals by Berk Pharmaceuticals and DDSA Pharmaceuticals against decisions of the patent office in imposing terms for compulsory licences for the sale of chlordiazepoxide, were dismissed by Mr Justice Whitford, sitting as a patent appeal tribunal in the High Court on Monday.

DDSA were the main appellants. They had a compulsory licence and now manufacture the drug. They sell at 20 per cent below the price of the patentees, F. Hoffman-La Roche, A.G. Berk have also been granted a compulsory licence and propose to sell at 10 per cent below Roche.

In the appeal to the tribunal, DDSA submitted that where there were two compulsory licensees the terms should be identical. They therefore asked for an additional term to be placed in the Berk licence requiring them to manufacture in England 50 per cent of the drug sold by Berk after the first year of the licence.

DDSA said that as Berk were a big company, and would sell on a much greater scale, Berk might drive them out of business, and that it was desirable that

compulsory licensees should be obliged to manufacture in England.

The judge said that there was no suggestion that DDSA were making 50 per cent of the drug they sold in Britain and if they did not manufacture they were free to revert to importation. No case had been made out for such a term to be imposed in the Berk licence.

Berk appealed against the royalty rate and contended that it should not be calculated on a rate per kilo as for the DDSA licence, but on a percentage of the selling price.

Berk also said that, however great the merits of ensuring that licensees under one patent were on the same terms, the overriding duty under the Act was to settle such terms as would ensure lowest possible prices to the public, coupled with ensuring a reasonable advantage to the patentee.

The judge said there was no real ground for challenging the decision. Both appeals must be dismissed. DDSA would pay Berk £100 towards costs and Berk would pay £100 to Hoffman-La Roche.

Harrogate chemist is 109

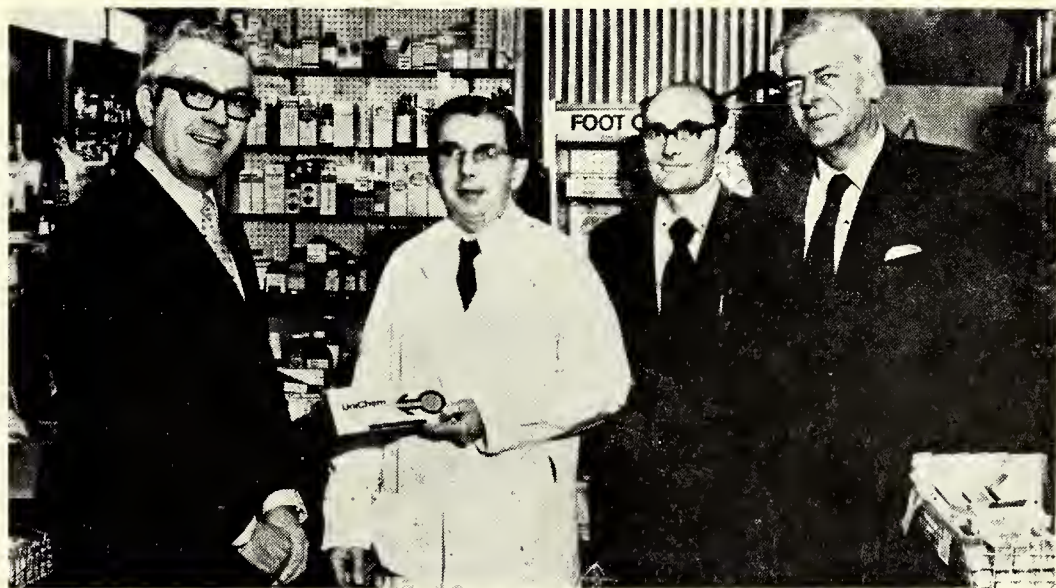
Britain's oldest chemist and Harrogate's oldest resident, Mr Frederick Victor Butterfield, celebrated his 109th birthday on Wednesday.

Mr Butterfield, who is a resident at Edenfield Nursing Home in Tewit Well Road, Harrogate, qualified as a pharmacist in 1885 and opened his first dispensary in Harrogate, in 1893.

Radio boost for campaign

Radio publicity has been given to an unwanted drugs campaign being organised during the next three weeks by the Royal Borough of Kensington and Chelsea and the West Metropolitan Branch of the Pharmaceutical Society.

Branch chairman Mr B. J. Masters and the borough medical officer of health, Dr D. J. Sheerboom, were interviewed on Radio London last Tuesday, and Mr R. Jackson, branch secretary, has also been interviewed for Radio 4's Woman's Hour.



Mr Colin Griffiths (left) a Unichem director, presents a £60 holiday voucher to Mr Leo Green (centre) winner of Unichem's Farley's promotion draw. Also present were Mr Ken Bingham, Unichem's area representative (rear), and Mr G. Paton, Farley's district manager

'Ethicals' excluded from price control

Price control under the Government's Price and Pay Code, will not apply to prices of "ethical" medicines supplied to the United Kingdom market. The Code was published as a Consultative Document on Monday, Cmnd 5249 (H.M. Stationery Office, £0.26).

It states that among prices not controlled are "prices of 'ethical' medicines supplied to the UK market to the extent that regulation of their prices is within the scope of any agreement made between the Secretary of State for Social Services and representatives of manufacturers of those medicines, but only so long as such an agreement is in force."

The general objectives of the policy on prices is to limit the extent to which prices may be increased on account of increased costs and to secure reductions as a result of reduced costs; to reinforce the control of prices by limiting profit margins per unit of sales or turnover while safeguarding investment; and to reinforce the effects of competition.

Price increases will only be allowed to reflect allowable increases for labour, materials, rents, rates and interest charges if incurred after September 30, 1972.

Not more than 50 per cent of pay increases may be passed on as price increases.

Quality to be maintained

The Code makes the point that a reduction in quantity or quality is equivalent to a price increase. Quality change in goods or services, quantity change in sales units or artificial creation of new products, says the Code, should not be used as a means of avoiding the requirements of the Code. "Where the Price Commission form the opinion that this has been done, they may seek price reductions or disallow cost increases."

Where there is a fall in raw material prices or in other allowable costs, this should, says the Code, be fully reflected in price reductions. In addition, prices should be reduced where other factors (such as an increase in the volume of sales since the last price increase) lead to a "significant fall in allowable costs per unit." Where an enterprise is making a loss, it may increase prices to cover its costs.

Net profit margins must not exceed the average level of the best two of the last five years of account preceding April 1, 1973.

The provisions on allowable cost increases do not, says the Code, apply to wholesalers, retailers or other distribution enterprises. However, in the determination of prices for sales to the UK market, gross percentage margins in distribution should not exceed the level of the last complete account year ending before April 1, 1973,

less an appropriate deduction for the abolition of SET.

Where the costs of particular goods to wholesalers or retailers rise out of line with any general movement in the price level, the enterprises concerned should reduce their percentage margins to take account of the disproportionate increase in price.

The gross percentage margin in the previous account year should be calculated

Amendments to VAT regulations

The Value Added Tax (General) (Amendment) Regulations 1973 SI 1973 No 244 were laid before Parliament last Friday and become operative on April 1. Among the amendments to the principal Regulations (published as SI 1972 No. 1147) are:

□ Regulation 24, which deals with the methods to be used by partly exempt persons for calculating deductible input tax, has been amended to make it clear that a person who uses Method 2 is not entitled to deduct tax on goods which he acquires for onward supply in the same state unless their supply by him is taxable. This removes an anomaly which would otherwise arise in respect of supplies of goods in connection with certain exempt services.

□ Regulation 25(e) and the consequential amendments to Regulation 27 provide that where a trader assigns a debt the transaction is disregarded for partial exemption purposes.

The assignment of a debt is exempt and the value of the output is equal to the money received on assignment. Without the new Regulation a trader assigning debts would be partly exempt, even if he had no other exempt outputs, and might be unable to deduct all his input tax; and a trader who was already partly exempt for a

as a percentage of sales exclusive of purchase tax and compared with the gross margin after abolition of purchase tax as a percentage of sales excluding value added tax. In the calculation of gross margins both purchases and sales should exclude VAT. Where enterprises do not already have accounts showing separately the purchase tax content of their sales in earlier years, it should be estimated on the basis of the best available information.

On pay, the Code says that the limit is £1 per week plus four per cent and individual rises must not exceed £250 a year.

But working hours may be reduced to not less than 40 hours a week outside the pay limit and improvements in holidays up to three weeks a year are excluded.

Where personal increments are part of a well established system of annual increments based on merit, age or seniority which was in force before November 6, 1972 and do not exceed those paid in similar circumstances in previous years, they will be outside the pay limit.

different reason might suffer a further reduction of the amount that he could deduct.

□ An amendment to Regulation 27 introduces a new *de minimis* rule for partly exempt persons, under which Customs and Excise can authorise a person to deduct all his input tax, subject to the normal rules, if that part of it which is attributable to his exempt supplies is less than 5 per cent of the whole. This is an alternative to the existing rule which permits a partly exempt person to deduct all his input tax if the value of his exempt supplies is less than either £100 a month or 5 per cent of the total value of his supplies.

□ An amendment to Regulation 31 provides that VAT shall not be repaid on imported spirits used for medical or scientific purposes. It removes an anomaly whereby tax on the use of imported spirits would be less than on the use of British spirits.

New PATA president

Mr Scriven J. Turner has been elected president of the Proprietary Articles Trade Association for 1973. He has been on the retail section of the Association's council since 1966.

Mrs Brenda Harwood (left) manageress of E. R. Pear, MPS, 412 Broxtowe Lane, Apsley, Notts, receives a jewel case for her winning entry in a Syntex skin care competition. Miss Janet Spencer, Syntex representative in West Riding makes the presentation



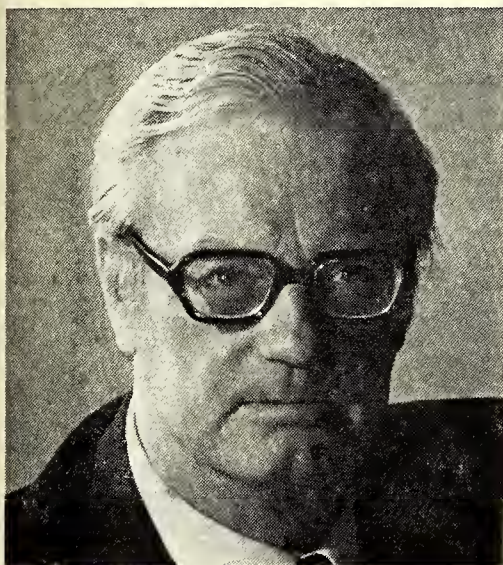
People

Topical reflections

BY XRAYSER

The Branches

Mr R. G. Hoare, FPS, chairman of the pharmaceuticals division of Imperial Chemical Industries Ltd, has been elected president of the Association of the British Pharmaceutical Industry. He will take office on April 17, succeeding the retiring president, Mr Ivar McG Boden, chairman, E. R. Squibb & Sons Ltd.



Mr R. G. Hoare

Co-incident with Mr Hoare's appointment, the ABPI board elected three new vice-presidents. They are **Mr F. Goulding, FPS**, chairman and managing director, Pfizer Ltd; **Mr L. Spalton, BPharm, FPS**, vice-chairman, Sterling-Winthrop Group Ltd and **Mr R. Smart**, commercial director of Glaxo Holdings Ltd.

Lord Cohen of Birkenhead was entertained to dinner by members of the Council of the Royal Society of Health, to celebrate his third term of office and to mark his forthcoming further term, as president of the Royal Society of Health.

Mr Wilfred Swallow, group pharmacist to Chesterfield Hospitals, was presented recently with a cheque from the Hospital Management Committee and the proceeds of a collection among colleagues to mark his retirement.

Deaths

Blankley: Recently, Mr George William Blankley, MPS, late of Front Street, Arnold, Nottingham. Mr Blankley qualified in 1921 and took over the family business established at the same address by his great grandfather.

Hurson: On February 16, Mr John Alphonsus (Alphy) Hurson, MPS, 11 Nutley Road, Dublin, aged 61. Mr Hurson, a native of Donaghmore, co Tyrone, qualified in 1935 and following a spell in Todds' pharmacy in the Curragh, co Kildare, he opened his own pharmacy at 84 Talbot Street, Dublin, in 1937, which he continued to operate until his illness.

THE RESOLUTIONS submitted for consideration by the Pharmaceutical Society's meeting of branch representatives display the activity and interest of the branches themselves and, at the same time, provide an indication of current thought throughout the country.

Those who give active support to their local organisation are usually those to whom pharmacy, as a profession, means a great deal, and a study of the twenty-three motions shows that professional aspirations are far from being extinguished in Britain. I have no intention of going through the list exhaustively—that will be the task of those who attend the meeting on May 17—but some of the resolutions may be looked at in advance.

That from Bedfordshire (No. 5) indicates that in that area there is support for the Council's attitude toward the much-discussed draft directive of the EEC relating to the sales of medicinal products. Despite opposition from some correspondents in the pharmaceutical Press, it seems that a good cross-section of the members, as represented by a branch, is in complete agreement with the disputed item 6.

The motion next on the list, from Sheffield, should give further encouragement to the Council in its acceptance of the principle that no individual pharmacist, partnership or body corporate may have more than one set of premises in contract to provide pharmaceutical services under the NHS—the continental one man one pharmacy practice. I think it unlikely that the meeting, or the Council, for that matter, will endorse the proposal that the pharmacist actively responsible for the pharmacy should be a party to the contract and should receive the professional fees attached to that activity—not because I do not see the logic of the suggestion, but because at present vested interests are too strongly entrenched.

It may encourage Sheffield to know that such a proposal was put forward as long ago as 1948, but was received with incredulity and horror. What, in effect, the resolution seeks to do—and with considerable justification—is to recognise that the qualification is paramount and invested capital is only secondary. Any business may be run on money, but the linchpin in pharmacy is the capital represented by a qualification.

Appearance

Finchley takes up the vitally important matter of professional appearance. The resolution reads that "the Society should actively encourage general practice pharmacists to give a professional appearance to their pharmacies." I heartily agree. I hope that someone in the area still has a copy of the Committee of Inquiry report of 1941. If so, the branch will find abundance of artillery to support their argument.

I cannot imagine that the meeting will do other than accept, though the motion might have gone further than merely "actively encourage." The Council may, with truth, say that that is already its policy. What we want to know is what can be done beyond merely encouraging. Finchley should pursue the subject with vigour now and in the future.

Moore: On February 6 Mr Michael Francis Moore, MPSI, 60 Donore Avenue, South Circular Road, Dublin. A native of Scotshouse, co Monaghan, he served his apprenticeship in Nicholsons of Clones and after qualifying in 1946 became manager of Leonards' pharmacy in Talbot Street, Dublin, before opening his own pharmacy in Donore Avenue in 1952. He is survived by his wife (who is pharmacist) and five children.

Robinson: Recently, Mr George Robinson, MPSI, The Diamond, Donegal. Mr Robinson qualified in 1939 and had his own pharmacy at The Diamond for many years.

Watson: On February 9, Mr John James Gourley Watson, MPSNI, 133 Harland Avenue, Sidcup, Kent. Mr Watson qualified in Northern Ireland in 1928. In 1955 he moved to London, where he purchased a pharmacy.

Company News

ICI to split marketing of pharmaceuticals

ICI pharmaceuticals division have decided to separate the sale of "ethical" and retail products by marketing the latter under the company name of Avlex Ltd.

The division state that the reasons for the separation are the growing size of both ranges and the increasing differences between the advertising, promotion and distribution of the products. Also, the manufacturing and promotional requirements of the Medicines Act make a clear distinction between medicines and toiletries desirable to both the manufacturer and the pharmacist.

The products involved in the change are the Savlon and Lorexane ranges, and Flypel gel, Tetmosol soap, Mimo spray and Footsy aerosol range.

The Avlex company will operate from the pharmaceuticals division headquarters in Cheshire under the address Avlex Ltd, Macclesfield, Ches SK10 4TG.

Martindale's hospital depot opened in London

Mr F. J. Aldridge, controller of supplies at the Department of Health and Social Security, officially opened Martindale Samore Ltd's new hospital depot at 30 Brewery Road, London N7, last Friday.

Formerly on two floors in Bayswater the depot was transferred about three months ago to a new single storey building, with offices attached in North London.

To mark the occasion the company invited hospital pharmacists to the ceremony and to see over the premises. They heard Mr Aldridge say that the Department of Health expected the prices of medicines and appliances to be fair and by that he meant that they should reflect

a reasonable profit for the makers and distributors. Mr Aldridge was introduced by Sir Hugh Linstead, chairman, Macarthy's Pharmaceuticals Ltd, Martindale's parent company.

Giving details of the depot, its manager, Mr I. S. Benjamin, said they delivered daily to hospitals over an area bounded by Bedford, Brighton and Portsmouth. They made a twice-weekly delivery in Hampshire, Dorset and Wales and twice daily in Greater London.

In designing the layout of the warehouse security was given top priority. Special features include a double-wall DDA room and separate locked cages for each delivery round—the driver has a key which will only open his cage.

British Dyewood acquired by American firm

Harshaw Chemicals Ltd, Daventry, Northants, have acquired British Dyewood Co Ltd, Glasgow, and its subsidiary Lambeth & Co Ltd.

British Dyewood is being re-named Harshaw Chemicals Ltd, fine chemicals division. They manufacture and sell tannic, gallic, and pyrogalllic acids and other related fine chemicals. A significant proportion of its output is sold outside Great Britain, and similar products are manufactured and sold in US by the Harshaw Chemical Co of Cleveland. Harshaw Chemicals is a wholly owned subsidiary of Kewanee Oil Co, of USA, and is part of its international operation, which includes Harshaw companies in Holland, France, Germany, Spain, Brazil, Mexico, Colombia and Japan.

Fine chemicals division will continue its

present operations from Glasgow under its existing management, and will be headed by Mr John Campbell, formerly managing director of British Dyewood who becomes general manager of the division and also joins the board of Harshaw Chemicals Ltd. Managing director of Harshaw Chemicals Ltd, and manager of European operations, is Mr Ian S. Young, who is located in Daventry. The chemicals merchandising business of Lambeth will also be continued from Liverpool.

United Glass profits up

Pre-tax profits of United Glass Ltd rose to over £5m for the year ended December 23, 1972, an increase of 66 per cent on the previous year.

Briefly

G. W. Carnrick Co Ltd, have moved to Mouliniere House, 225 Putney Bridge Road, London SW15 2PX (telephone: (01-870 4252).

Mr R. G. Catterson, MPS, has taken over the lease of shop premises at Unit 16 Shawbridge Arcade Shopping Centre, Pollokshaws, Glasgow.

Inveresk Paper Co Ltd, have moved to Lichfield House, Smallbrook Queensway, Birmingham B5 4HX (telephone 021-643 6301).

Earex Ltd, are moving on April 2 to larger offices at 3 Miles Buildings, Bath, Somerset. (Telephone: Bath 25633.)

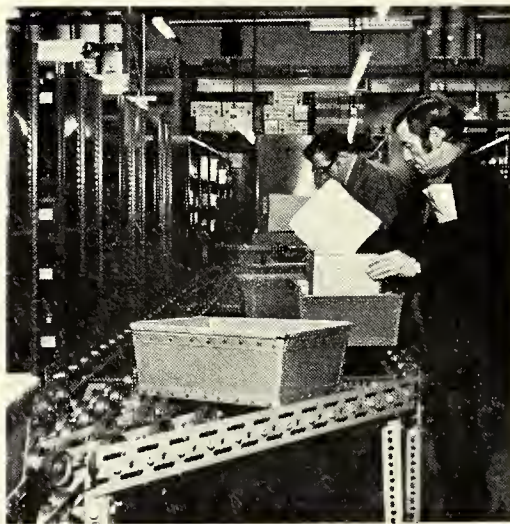
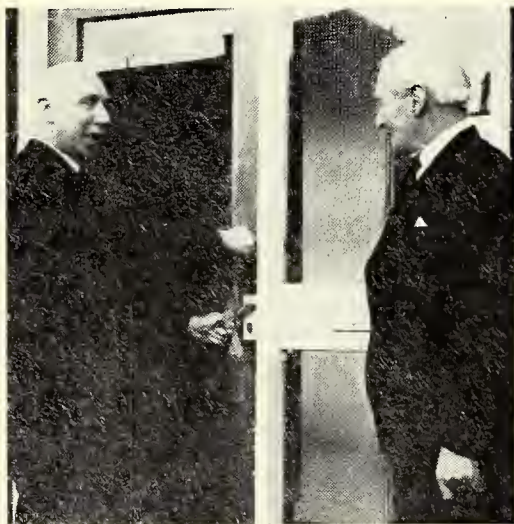
Appointments

Sangers Ltd, have appointed Mr Norman B. Bilton their marketing and sales manager.

Galen Ltd., 8 Church Road, Portadown, co Armagh, have appointed Mr John W. J. Hogg their marketing executive.

Menley & James Laboratories: Mr Ian Campbell, who joined Menley & James as a group product manager at the beginning of 1972, is promoted marketing manager. UK: Miss Lynn Thompson is promoted brand manager and continues also as manager, market research; Mr E. J. B. King is promoted brand manager and additionally is new products co-ordination manager. Newly-joined members are Mr Ian J. Roberts, appointed export manager and Mr A. R. Attwood appointed financial manager.

Miss A. D. Pritchard has been appointed area pharmacist to the Liverpool Regional Hospital Board. Trained at the Liverpool School of Pharmacy, she has held posts in Scarborough at St Thomas's Hospital and the Royal Free Hospital in London. She became the deputy chief pharmacist to the Chester Hospital Management Committee and then became chief pharmacist at the Coventry and Warwick Hospital. Miss Pritchard returned to the West Cheshire Hospitals in 1967, first as a deputy group pharmacist and latterly as an acting group pharmacist. She is a member of the local pharmaceutical committee and vice-chairman of the local branch of the Pharmaceutical Society.



Mr Aldridge of the Department of Health (left) officially opening Martindale's hospital depot in London last week. With him is Sir Hugh Linstead. On right, assembling orders in the warehouse. Assistants on each side of the conveyor belt are responsible for four bays

New products and packs

Babycare

Zorbit nappy liners

Zorbit nappy liners (£0.42 per 100) introduced by the Courtaulds Freshtex sales organisation are produced from a purpose-made fabric developed to give "wet strength" and are medicated with an anti-septic solution which helps prevent nappy rash" (Freshtex, 91 Bolsover Street, London, W1).

Savlon baby care soap

Avlex Ltd, a subsidiary of ICI pharmaceuticals division, have added Savlon baby care soap to their baby care range. Available as a 75g toilet size (£0.08) and 140g bath size tablet (£0.11), it has been specially formulated, say the makers, to provide a gentle, pleasantly perfumed soap to cleanse a baby's skin (Avlex Ltd, Alderley Park, Macclesfield, Cheshire).

Kleinerts baby lines

Two new products have been added to the Modella range of baby requisites of Kleinert's. Sleepy-Drye (£0.75) is an all fabric nappy cover which "provides the advantages of rubber or plastic pants but allows the skin to breathe". Made in three layers, the two outers are of Repelthal which surround a middle layer of porous water repellent fabric manufactured from polyester fibres.

Sleepy-Drye feature pin tabs (complete with pins) to hold the pants up and the vest or shirt down. They are available in four sizes for babies from birth to 18 months.

Trainy-Drye (£0.88 a pair) are training pants which "offer the combined protection of a nappy, liner and cover all in a single pant." They are designed to be used without a nappy. Two layers of Absorpthal fabric next to the skin absorb and contain the urine and two interlining layers of Repelthal trap the moisture away from the skin yet prevent leakage.

Trainy-Drye training pants are supplied in four sizes for toddlers up to four years.

Both Sleepy-Drye and Trainy-Drye are being currently test-marketed in outlets in England, Wales and Scotland at £5.40 per dozen for Sleepy-Drye and £6.50 per dozen for Trainy-Drye (Kleinert's Inc, 91 New Bond Street, London W1).

Tomorrow's Tommee Tippee

Turquoise and orange are the feature colours in new packaging for the Tommee Tippee range of nursery accessories made by Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland. The packs will have tri-lingual information and a new multi-fold leaflet showing the range will be included in each boxed line.



Cosmetics and toiletries

"Spirit of the West"

Faberge West is a new range of men's toiletries from Faberge, aimed, they say, "at a sophisticated, stimulating man of today who still has inside him the real spirit of the old West"! The Faberge West fragrance is a combination of citrus notes mingled with spices, wood and mosses. The range consists of lotion, talc, anti-perspirant, creme shave and soap; packaged in heavy glass bottles and beaten copper coloured cans. Available from May (Faberge Inc, Ridgeway, Iver, Bucks).

Children's bath additive

A new children's bath additive, Super Matey, has been introduced by Nicholas Products. Formulated specially for children between the ages of 2 and 11 it produces masses of bubbles, colours the water blue and includes a mild cleanser which cleans children while they play.

Packed in blue and orange 340cc "sailor-toy" bottles (£0.32) enough for 20-25 baths, Super Matey is said to carry an extra bonus for mothers in that it leaves the bath free of the usual tide mark (Nicholas Products Ltd, 225 Bath Road, Slough, Bucks).

Nail lacquers from Lauder

Estee Lauder has introduced a range of Lustrous nail lacquers consisting of 22 shades, all of which co-ordinate with her Re-Nutriv Rich Rich lipsticks and Tender lip tints. Three colourless nail lacquers are also included: base coat, protective top coat and frosted top coat (Estee Lauder Cosmetics Ltd, 71 Grosvenor Street, London W1).

Arden's Spring looks

Flawless finish (£1.65) is a new moisture-based, sponge-on foundation makeup in a compact from Elizabeth Arden available in eight shades. Also new is a lipstick collection, Naturally Moist Lipcolour (£0.80), in a choice of 12 shades—clear and frosted. Both products will be available from April 1.

Creative colouring pencils are another



new idea and are designed to add colour to lips, eyes, cheeks, temples and even feet! These pencils (£0.65), say Arden, are soft and easy to use and have been formulated to give either clear colour or faintly frosted effects. 12 shades make up the range which will be in the shops from April 13 (Elizabeth Arden, 76 Grosvenor Street, London W1A 2AE).

Two for men go national

Gillette are launching into national distribution The Dry Look, an aerosol hair-groom for men (£0.30) and Foot Guard, an aerosol foot deodorant (£0.40) after successful test-market campaigns started last year.

The products are being backed by one of the dearest promotional campaigns ever mounted by Gillette for new products, with some £400,000 for advertising.

The Dry Look is said to be invisible in use providing a natural hold to the hair. It is available in a brown can for normal hair and black can for "difficult" hair. Merchandising and display material available (Gillette Industries Ltd, Great West Road, Isleworth, Middlesex).

Sundries

Spots before the eyes

The Belinda range of cosmetic purses and travel holdalls by Jacqueline is available in a three colour assortment of pink, lilac and black spots on white, or white spots on the same colours. The fabric is a washable jersey nylon and all items in the range have waterproof linings. New styles in the Belinda range include a travel roller, satchel bag and a long zip cosmetic purse.

With every beach bag purchased, a free pair of sunglasses (retail value £1.00) is given to the consumer (Jacqueline Sales, Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland NE24 4RG).

Trade News

Lil-lets relaunched with extra brand name

Lilia-White (Sales) Ltd, Charford Mills, Birmingham 8, are relaunching Lil-lets tampons which were said to have achieved an overall sales increase of 25 per cent last year.

Springboard of the relaunch operation is what Lilia-White claim to be a "significant performance improvement to the product" now with a round-ended shape as opposed to the previous flat-tipped design. In a national survey of 400 women, conducted for Lilia-White by NOP Market Research in more than 20 population centres, it was found that some 70 per cent of tampon users preferred the new shape.

The packaging now carries the additional brand name "ob" which are the initials of the German words *ohne binde* meaning "without towels". These initials, which are the most frequently found trademark overseas for the product, are being included because "of the universal nature of the product", now sold in more than 100 countries.

Further research, say Lilia White, confirms that its new pale blue coloured pack is less clinical and more feminine than earlier designs. All three absorbencies continue available in packs of 10 and 20.

New Unichem route

Delivery vans on the newest Unichem route out of the Kingston depot will cover more than 550 miles in the round trip, encompassing a large number of existing customers, and several new Unichem members, throughout the West Country.

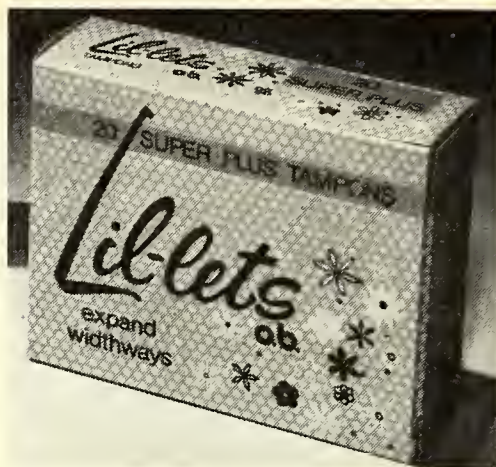
The new route will be operated twice weekly when the vans will call as far west as Bodmin. Previously the Unichem customers in the area had relied on postal deliveries, but now the van will leave Kingston on Tuesday and Thursday mornings, returning the following days—making deliveries on the way out and back.

Pharmacists in South Wales have given an "enthusiastic welcome", report Unichem, to their profitable buying (PB) and retail control schemes.

Two meetings in Swansea and Cardiff were held this month at which Mr Michael Frith, a director, and Mr John Speller, general sales manager, of Unichem, presented the advantages of the twin systems to independent pharmacists of South Wales who by their acceptance proved themselves quick to recognise a winner."

Price reductions

Fisons Ltd, pharmaceutical division Loughborough, have announced price reductions in certain of their toiletry products and Bisk range (see Price Service Supplement).



New distributor

Following the acquisition of the 138 year-old perfumery company, J. Grossmith Ltd, by the Rosedale group last July, distribution of the Grossmith range is now being handled by the Fassett & Johnson sales force, 19 Radford Crescent, Billericay, Essex.

Now shrink wrapped

For a trial period, John Wyeth and Brother Ltd, Huntercombe Lane South, Taplow, Maidenhead, Berks, will be shrink wrapping in dozens, the 500ml plastic packs of Aludrox, Aludrox SA, Mucaïne, Petrolagar No. 1 and No. 2. The dispensing unit of Petrolagar remains in its present packaging.

Prescription specialities

TAVEGIL elixir

Manufacturer Sandoz Products Ltd, 41 Upper Grosvenor Street, London W1X 0AL

Description Colourless elixir with an odour of peaches containing in each 5ml, 0.67 mg clemastine hydrogen fumarate (equivalent to 0.5mg clemastine base)

Indications, etc As for Tavegil tablets

Dosage Children up to 12 years, one or two 5ml spoonfuls night and morning, according to age. Adults, two 5ml spoonfuls night and morning. In individual cases the dose may be increased to 12 spoonfuls daily if necessary

Packs 150ml (£0.36 trade) and 2 litres (£4.30).

Supply restrictions PI, S7

Issued February 1973

DERMOPLAST aerosol spray

Manufacturer Ayerst Laboratories Ltd, Forge Court, Reading Road, Yateley, Camberley, Surrey

Description Aerosol spray containing benzocaine 4.5 per cent, benzethonium chloride 0.1 per cent, menthol 0.5 per cent, 8-hydroxyquinoline benzoate 1.2 per cent, methylparaben 2 per cent

Indications Relief of discomfort after episiotomy and other forms of perineal surgery
Method of use Apply two or three times daily, holding twelve inches away from the affected area

Precautions Keep away from the eyes. If

Bonus offers

Radiol Chemicals Ltd, Witham, Essex, or NPU Marketing, Refrance, 12 invoiced as 10 (until March 16).

Richard Hudnut Ltd, Chestnut Avenue, Eastleigh, Hants. Schick double-edge blades, 5's dispensers and 5's wrapped. 15 per cent discount until April 30.

Fassett & Johnson Ltd, 19 Radford Crescent, Billericay, Essex, Rosedale Products: 200g Lanospray aerosols, 18 invoiced as 12 (minimum 72). Hairspray sachet refills, 12 invoiced as 11 (minimum 24 assorted). Hair thickener 20cc, 36 invoiced as 24. Family shampoo 280cc, 15 invoiced as 12 (minimum 48 assorted). Herbal and pine baths 250cc, 12 invoiced as 10. New lemon bath 250cc, 12 invoiced as 10. Splash Cologne/lavender, 12 invoiced as 11. John Bell, Hills & Lucas: Stop It, 12 invoiced as 10. Lotil cream, 12 invoiced as 10. Frador/Fradojel display unit, 12 invoiced as 9. Wassen: Pollen B, code 900, 6 invoiced as 5. Nestle Le Mur: Nestle Lite, 12 invoiced as 11. Associated Products: Quickie range, 12 invoiced as 11 (minimum £6). All offers until March 23.

redness, irritation, swelling or pain persists or increases, discontinue use. Care should be taken in patients known to be sensitive to benzocaine

Notes: Remains adherent to the skin but will not set. Can be used for self-medication. Staining of sheets or clothes easily removed by normal laundering. Keeps the medicaments in close proximity to the wound so protecting patients against infection and soothing pain

Pack Can of 156g (£0.86 trade)

Supply restrictions P.I. (hospitals and nursing homes only)

Issued February 1973


New analgesic

Wander are introducing Para-seltzer effervescent tablets each containing 500 mg paracetamol and 20 mg caffeine formulated to be dissolved in water and taken as a pleasant drink. Indicated for the relief of pain associated with rheumatism, toothache, muscular aches, period pains and headache, and as an anti-pyretic and analgesic to relieve the symptoms of colds and influenza.

Para-seltzer is packed in 100's (five tubes of 20, £1.27 trade plus £0.31 tax) (Wander Ltd, Pharmaceutical order department, PO Box 4, Calverley Lane, Horsforth, Leeds LS18 4RP).

Broad-spectrum antifungal

Bayer Pharmaceuticals have introduced Canesten (clotrimazole) broad-spectrum anti-fungal and trichomonocidal agent. It is presented in two forms—cream (20g, trade price £0.67) and vaginal tablets (six tablets full treatment course) packed in aluminium foil with applicator (£0.64 trade) (Bayer Pharmaceuticals Ltd, Haywards Heath, Sussex).



**If my mum doesn't
buy me Zorbit Nappy Liners,
I'm leaving home.**

**Want to make
something of it?**

Promotions

PolyGlow's display unit

Following the launch of PolyGlow last Autumn, the advertising campaign for the hair colourant will continue through to the second half of this year with full-colour, page advertisements in women's magazines, using the theme "Introducing PolyGlow, the new hair colouring with an inner glow". A new dual-purpose display unit has been specially designed to ease the stacking of the triangular pack. The unit which can also be used as a permanent shelftray has six facings, one for each shade, and a capacity for holding two dozen packs.

The company are offering a display bonus of 10 per cent if the merchandiser is bought (unstocked) and, at the same time, place any order for PolyGlow. Furthermore, if the merchandiser is still on display when a representative calls, another 10 per cent discount will be given (Lambert Chemical Co Ltd, Chestnut Avenue, Eastleigh, Hants).

New shape Lil-lets campaign

Backing the introduction of new round-ended Lil-lets tampons is the biggest-ever advertising campaign for the brand which, Lilia-White claim, is more than 40 per cent up on last year's expenditure.

The campaign begins in April and continues until December with a total of more than 250 full-colour advertisements including 14 double-page spreads and over 130 pages. Strongly slanted to the younger consumer, the campaign consists of 206 insertions in teenage magazines such as *Valentine*, *Mirabelle*, *Jackie*, *Romeo*, *Honey*, *19* and *Petticoat*. Reaching more mature consumers will be nearly 50 advertisements in women's magazines including *Woman*, *My Story*, *Nova*, *She* and *True Romance* (Lilia-White (Sales) Ltd, Charford Mills, Birmingham 8).

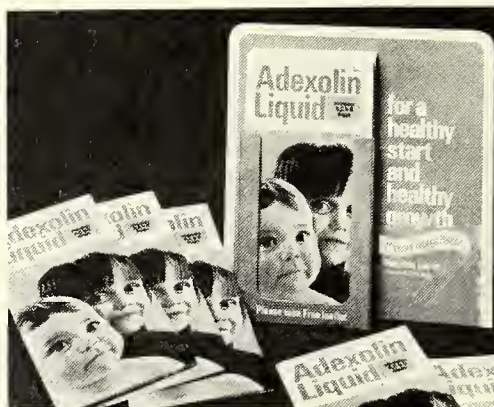
Laboratory theme on TV

The new 30-second Anadin TV commercial, which is being shown on all channels, depicts a scene from the Anadin quality control laboratory where all the ingredients for Anadin are checked before manufacture (International Chemical Co Ltd, Chenies Street, London WC1).

Protei-nail window pack

Nutress Laboratories have introduced a new window pack for the Protei-Nail tube which has, say the manufacturers, doubled the rate of sale during a recent test market survey in over one hundred outlets over a two month period.

The current spring advertising programme for Protei-Nail includes advertisements in *Woman*, *Woman's Own*, *Woman & Home* and *Woman's Journal* (J.N. Toiletries, Kitty Brewster Estate, Blyth, Northumberland NE24 4RG).



Adexolin liquid leaflet

Because many mothers may not appreciate the importance of supplementing their children's diet with vitamins A, C and D, Glaxo Laboratories have designed an informative leaflet and leaflet holder on Adexolin Liquid A, C and D. The holder takes 30 leaflets and is available to retail chemists or health clinics through representatives or direct from Glaxo Laboratories Ltd, Greenford, Middlesex UB6 0HE (quoting HD 692).

Undercover move

Undercover Products (International) Ltd, manufacturers of disposable garments for women, men and children are currently running a promotion for their Undercover Girl disposable briefs. The promotion takes the form of a circular and free sample sleeve of three panties, retail value £0.13 per sleeve, being sent to chemists in the UK. Mr David Sallon, managing director, commented on the campaign: "We think disposable briefs still have considerable potential and see them more as a hygiene line to be displayed with other sanitary products".

The company also makes Hygi cleaning cloths and Hygi handkerchiefs and plans are underway to introduce a range of cosmetics and toiletries later in the year (Undercover Products (International) Ltd, Queensway Industrial Estate, Wrexham, Denbighshire).

Cossack's print offer

Reckitt & Colman are offering consumers two free vintage car prints with three of the special labels from the standard size Cossack men's hairspray or two from the large size. The prints, the 1930 Bentley Speed Six and the 1932 Morgan three-wheeler models, are reproductions in full colour of original scale drawings and are presented on sand-grained paper suitable

for framing. A dump-bin headboard, cut-out in the shape of a bonnet and head-lamps, has been produced for "maximum impact" and there is also a cardboard model of the Bentley and shelf edge strips. The offer closes on November 30 (Reckitt & Colman Toiletries, Sunnysdale, Derby).

3p coupon on Kleenex towels

In another promotion on kitchen towels Kimberly-Clark are featuring a 3p coupon on all packs of Kleenex Flair towels and Kleenex kitchen towels during March. The coupon is redeemable against future purchases of Kleenex towels, and can also be exchanged for their Maxi-Dri towels. The Maxi-Dri towels are only available in the London area.

"The offer", said a spokesman for Kimberly-Clark, "gives customers the opportunity of buying all Kleenex towels at a discount, and based on previous experience a redemption rate of at least 20 per cent is expected" (Kimberly-Clark Ltd, Larkfield, nr Maidstone, Kent).

Consumer offers

☐ With every sun product purchased (except Tan Orlane) from the Orlane range the buyer receives a travelling presentation of five fresheners perfumed with the MW fragrance (Jean D'Albret-Orlane Ltd, 125 High Holborn, London WC1V 6BR).

☐ On all sizes of Fashion Style very curly and soft casual home-perm packs there is a printed coupon worth 10p redeemable against a bottle of Polyherb shampoo. The offer will continue until stocks of promotional packs last (Richard Hudnut Ltd, Eastleigh, Hants).

Pharmaton use nationals

The new advertising campaign for Pharmaton Capsules started earlier this month and includes insertions in the *Daily Express*, *Daily Mail*, *Daily Telegraph*, *Evening Standard* and *Radio Times*. Counter display units are available from Vestric representatives (Vestric Ltd, Chapel Street, Runcorn, Cheshire).

on TV next week

Ln = London; M = Midland; Lc = Lancashire; Y = Yorkshire; Sc = Scotland; WW = Wales and West; So = South; NE = North-east; A = Anglia; U = Ulster; We = Westward; B = Border; G = Grampian; E = Eireann; CI = Channel Islands.

Askit powders: Sc, G

Balanced Care shampoo: All areas

Brylcreem: M, Lc, Y, Sc, WW, NE, A, U, We, B, G, E, CI

Buttercup syrup: Y

Caroline disposable nappies: M

Close Up: Y

Falcon: Ln, M, A

Fiesta paper towels: All except U, E

Harmony hairspray: All areas

Head and Shoulders: All except So, E

Three Wishes foam bath: All areas

Vicks Sinex: All except U

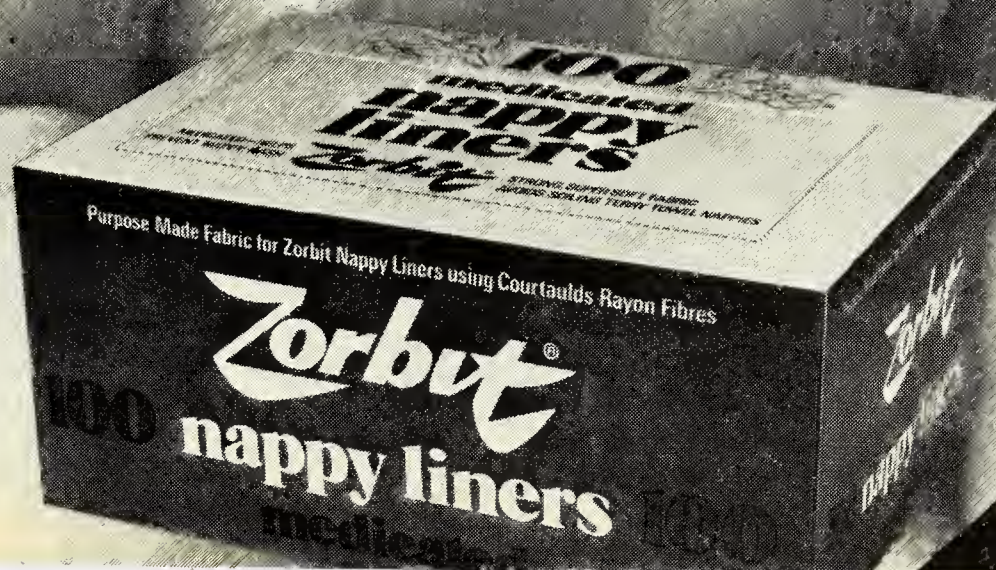
Wilkinson Sword: All areas

Zoflora: M

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Oral contraceptives

MECHANISM, EFFICACY AND SAFETY

by P. S. COLLIER, BPharm, MPS, Department of pharmacy, The Queen's University of Belfast

The pituitary gland has several important functions, not the least of which is to regulate the normal menstrual cycle through its action on the ovaries. Cyclical secretion of follicle stimulating hormone (FSH) and luteinising hormone (LH) by the pituitary results in the development of graafian follicles, ovulation and corpus luteum formation within the ovaries.

The ovaries have a dual role for as well as giving rise to the ova which are released about day 14 of each cycle they secrete two steroid hormones, oestradiol and progesterone.

FSH secreted in the early part of the cycle is thought to be responsible for initiating the development of a group of follicles one of which will continue to mature until day 14 of the cycle. The developing follicle has two cell layers. The inner, avascular granulosa is responsible for the production of progesterone, which is secreted into the liquor folliculi, while the theca interna secretes oestradiol. Blood levels of oestradiol and its metabolites oestrone and oestriol increase steadily till day 13, and then fall sharply prior to an increase in LH levels. Observations made of hormone patterns during a normal menstrual cycle¹ and experimental work carried out using animals² suggest that the midcycle surge of gonadotrophin is caused by a preceding rise in oestradiol secretion.

Under the influence of LH the mature follicle ruptures releasing the ovum which remains viable for about 12 hours. The granulosa layer of the ruptured follicle develops into the corpus luteum which secretes oestradiol and progesterone during the remainder of the cycle. Together these two hormones prevent further secretion of gonadotrophins by the pituitary.

Following fertilisation, the zygote will take 5-6 days to descend the fallopian tube and become embedded in the endometrium of the uterus which has developed under the influence of oestradiol and progesterone. If fertilisation or implantation of the zygote does not occur the corpus luteum will cease to function after 12 days. The endometrium of the uterus will then break down resulting in menstruation.

Prevention of ovulation

In 1956 Pincus began to study the action of some synthetic progestogens in women. The study showed that ovulation could be abolished at will for as long as desired. Although oestrogen or progestogen alone can inhibit ovulation the combination of the two makes possible consistent inhibition of ovulation with lower doses of the progestogen. Menstrual bleeding is also better

controlled with oestrogen-progestogen combinations.³

Oral contraceptives currently available are combinations of a synthetic oestrogen, either ethinyloestradiol or mestranol, together with one of the following synthetic progestogens—lynestrenol, norethisterone, norethisterone acetate, norethynodrel, megestrol acetate and ethynodiol diacetate. According to the product considered the tablets are taken for 20-22 days followed either by a tablet free period or the taking of a lactose tablet to complete a cycle of 28 days. Less popular now are the sequential preparations where the patient commences taking oestrogen-only tablets, then combined oestrogen-progestogen tablets followed by a tablet free period to complete a 28 day cycle.

Cycle differences

Studies have shown that blood levels of FSH and LH in women taking oral contraceptives differ from those seen during a normal menstrual cycle, but there is no consistency of the patterns of FSH and LH secretion observed.⁴ It is known that oestrogen can inhibit FSH secretion and therefore abolish the stimulus for the development of the follicle and this may account for the action of oral contraceptives in some instances. However, should the graafian follicle start to develop, the progestogen present can inhibit LH secretion so that ovulation will not occur.

Experimental evidence that relates to the ability of oral contraceptives to prevent ovulation in response to exogenously administered gonadotrophins is conflicting.⁵⁻⁷ The possibility that oestrogen-progestogen combinations may inhibit ovulation by a direct action on the ovary therefore remains uncertain.

That ovulation can occur during treatment with oral contraceptives is a recognised although infrequent occurrence. In such cases pregnancy is extremely rare, suggesting that oral contraceptives can act at sites other than the pituitary or ovaries. Synthetic oestrogens may alter the time taken for the zygote to be transported down the fallopian tube. The endometrium of the uterus might therefore be at a stage of development where implantation cannot take place, causing the zygote to be lost. Implantation is also less likely because the nature of the endometrium changes, becoming thinner and less glandular due to the action of the synthetic hormones.

One further possible mode of action is that the more viscous cervical mucus produced under the influence of oral contraceptives makes penetration by the sperm more difficult.

Oestrogen-progestogen mixtures, if taken by the patient in the manner recommended by the manufacturer, are virtually 100 per

cent effective (table 1). Pregnancy, when it occurs, is usually due to failure by the patient to take the tablets in the manner prescribed. This is illustrated in table 2 which relates to various combinations of norethynodrel and mestranol. The pregnancy rate is seen to increase with the number of tablets missed.

Sequential preparations require a high dose of oestrogen to prevent ovulation and they are less efficient in this respect than combined preparations, giving rise to a larger number of unwanted pregnancies. Similarly the low dose progestogen-only preparations are less efficient at preventing ovulation and therefore their use carries with it a higher risk of pregnancy.

Shortly after their introduction, fears began to be expressed about a possible relationship between thromboembolic disease and the use of oral contraceptives. The risk of hospital admission for deep vein thrombosis or pulmonary embolism in the absence of any other predisposing cause has been estimated as being about 6-7 times higher among married women using oral contraceptives than among those who are not,¹⁰ while the death rate from pulmonary embolism or cerebral thrombosis was estimated to be seven to eight times higher.¹¹ The use of contraceptive steroids is also estimated to increase the risk of post-operative thromboembolism threefold to fourfold.¹²

High oestrogen warning

In 1969 the Committee on Safety of Drugs issued a recommendation to doctors that oral contraceptives containing 50 µg of oestrogen should normally be prescribed as those preparations containing a higher dose of oestrogen were associated with a higher incidence of thromboembolism.^{13, 14} The Committee also suggested that as well as the oestrogen content of the preparation influencing the production of thromboembolism, it was possible that the nature and dose of the progestogen may also play a part.

Poller^{15, 16} showed that the use of oestrogen-progestogen combinations resulted in increased platelet aggregation and an increase in plasma levels of certain clotting factors. However, the use of progestogen alone (chlormadinone acetate) did not appear to cause similar clotting and platelet changes when observed over a six month period. After two years platelet aggregation was significantly accelerated but was not as rapid as with combined preparations. In women taking a progestogen-only preparation containing norethisterone for a period of six months reduced coagulability was noted.¹⁷ This work suggests the possibility of a reduction in thromboembolic risk when progestogen-only preparations are used instead of combined.

Early in 1970 the sales of a progestogen-

only contraceptive containing chlormadinone acetate were suspended following reports of the appearance of fibroadenomatous nodules in the mammary glands of bitches given very high doses. The effect of progesterone has since been studied at high dose levels and it produces similar mammary nodules.¹⁸ The authors of the report state "the appearance of fibroadenomatous nodules at a relatively early date in animals exposed to high dose levels of the natural hormone must, we believe, now give one serious cause to doubt the relevance to the human female of the development of similar nodules in animals given high doses of derivatives of 17 α hydroxyprogesterone. This view is supported, moreover, by the lack of any real correspondence between the histological appearance of these nodules and mammary carcinoma in the human."

No cancer link

It is known that in the younger age groups oestrogen can stimulate breast cancer. A possible link between breast cancer and oral contraceptives in some patients has been suggested,¹⁹ and it may be that some women with microscopic relatively latent tumour foci, which are not detectable clinically, may be susceptible.²⁰ However, in a retrospective study undertaken by Vessey et al²¹ there is no evidence to link the use of oral contraceptives with an increased risk of breast cancer in women under the age of 40.

A report suggesting that mestranol caused hepatoma formation in rats resulted in the Committee on Safety of Medicines requiring further toxicity tests to be carried out. In October 1972 the Committee published a report on these tests²² in which they concluded the results could not be interpreted as meaning that preparations containing mestranol constituted a carcinogenic hazard to women when used as oral contraceptives. The value of tests carried out in the report is questionable as a high incidence of neoplasm was found in control mice and rats used. In fact the value of mice as a species for carcinogenicity testing has recently been questioned.²³ When the results of further toxicity studies on primates and beagle bitches, now in progress in the United States, become available the Committee intend to review the situation. The Committee recommended "careful documentation, investigation and follow-up in all cases of amenorrhoea following hormonal contraception" in view of the effects observed on the pituitary gland by the rat and mouse experiments.

In 1966 three separate groups of workers reported cases of amenorrhoea following the withdrawal of oral contraceptive treatment.²⁴⁻²⁶ Since then the number of such reports have increased rapidly indicating a definite relationship between the condition and the use of synthetic oestrogen-progestogen mixtures. It does not appear that length of treatment with oral contraceptives is important or that there is a greater likelihood of it occurring in older women or women who have not had children. It has been shown²⁷ that the pituitary secretion of FSH is abnormal in women who are amenorrhoeic, and endometrial atrophy induced by oestrogen-progestogen mixtures has also been cited as a contributing cause. In many women the condition is to a large extent self-limiting.

Side effects of a less serious nature that have been reported among those using oral contraceptives include nausea, occasional vomiting, headaches, dizziness, tenderness of the breasts, weight gain, and breakthrough bleeding. These symptoms normally disappear after two or three cycles.

It has been shown that 6-7 per cent of women taking oral contraceptives were more depressed than women using physical means of contraception.²⁸ Whether or not the incidence of depression can be related to the dose of progestogen remains uncertain.

The effect of oral contraceptives on libido is difficult to assess and reports are conflicting.

It has been reported^{29, 30} that in certain women oral contraceptives may cause hypertension which in most cases is reversible, when the contraceptive is withdrawn.

Megaloblastic anaemia has been linked with the use of oral contraceptives by some workers^{31, 32} although if dietary intake of folic acid is increased most patients res-

pond satisfactorily and can continue to take oral contraceptives.

Other biochemical effects of oral contraceptives include raised plasma vitamin A levels,³³ raised serum lipid and cholesterol levels, and a decreased glucose tolerance.³⁴ The use of oral contraceptives may also give rise to pigmentation of the skin, a condition which is not readily reversible when the contraceptive is withdrawn.³⁵

The implication of oral contraceptives in certain conditions mentioned above requires them to be contraindicated in patients with a history of thromboembolic disease, breast cancer, other oestrogen-dependent neoplasms, abnormal liver function and undiagnosed abnormal genital bleeding.

The wide range of side effects reported in connection with the use of oral contraceptives may appear alarming. However, figures quoted by Inman and Vessey¹² (table 3) show that it is approximately 15 times safer to take the pill regularly for

Continued on p277

Table 1: Clinical effectiveness of oral contraceptives (After Drill⁹)

Contraceptive with dose	Women-years* of use	Pregnancy		Pregnancies per 100 women-years* (including missed tablets)
		Number of tablet failures	Patient failures (missed tablets)	
Envoid 10 mg	1,947	1	46	2.4
Envoid 5 mg	7,821	1	21	0.3
Envoid 2.5 mg	1,115	1	8	0.8
Ortho-Novum 2.5 mg	1,490	0	0	0
Anovlar 4 mg	746	0	0	0
Lyndiol 5 mg	861	0	7	0.8
Ovulen 1 mg	869	0	3	0.3

* A woman-year is defined as one woman studied over a period of one year.

Table 2: Pregnancy rate according to number of pills not taken in patients in San Juan⁹

Number of pills missed	Dose of progestogen mg/day	Number of women-years	Number of pregnancies	Pregnancy rate per 100 women-years
0	2.5	411	1	0.2
	5.0	1,685	4	0.2
	10.0	686	4	0.6
1 to 5	2.5	77	0	0.0
	5.0	154	4	2.6
	10.0	95	3	3.2
6 to 19	2.5	6	4	66.7
	5.0	19	8	42.1
	10.0	31	10	32.3

Table 3: Estimates of risk of death from pulmonary embolism or cerebral thrombosis in users and non-users of oral contraceptives compared with risk of death from certain other causes (after Inman & Vessey 1968)

	Age in years:	
	20-34	35-44
Estimated annual death rate per 100,000 healthy married non pregnant women from pulmonary cerebral thrombo-embolism.		
Users of oral contraceptives	1.5	3.9
Non-users of oral contraceptives	0.2	0.5
Annual death rate per 100,000 total female population		
Cancer	13.7	70.1
Motor accidents	4.9	3.9
All causes	60.1	170.5
Death rate per 100,000 maternities from all risks of pregnancy, delivery and puerperium		
	22.8	57.6

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Comment

Check on assumptions

Has the "friendly neighbourhood pharmacist" already disappeared in the United States?

Perhaps so, according to the preliminary findings of a survey of self-medication carried out from Ohio State University college of pharmacy and published recently in the *American Journal of Hospital Pharmacy*.

The authors of the survey set out to explore the decision-making process in self-medication and carried out a prospective study, using "diary" methods, of 294 households. It appears that discount pharmacies accounted for most "panellists" purchases of both prescribed and non-prescribed medicines, despite their relatively small number in the test city—Columbus.

All panellists were able to name their most frequently visited pharmacy—but only 28 per cent could name a pharmacist in it. Of the 50 per cent of householders that named a discount pharmacy as their prime source of drugs, only 10 per cent could name a pharmacist. The authors suggest this belies the stereotype of the "friendly neighbourhood pharmacist".

Upper-class householders reported a considerably larger number of acute illnesses than middle and lower-class householders, and each upper class incident lasted longer. At least one drug product was used in over 90 per cent of the cases—prescribed drugs in 31 per cent, non-prescribed in over 70 per cent, and both types together in 11 per cent. Colds, headaches, ear and throat ailments together accounted for half of all cases reported.

Seventy per cent of households included one or more "chronic" users of drugs—even though the population sample had been weighted by the pre-selection of families including children, thus excluding many elderly. Non-prescribed drugs were used regularly by 7.4 per cent of those surveyed, and prescribed and non-prescribed drugs together by a further 4.5 per cent. "The large proportion . . . points up the potential for drug interactions and adverse effects when these persons take remedies for acute conditions," say the authors.

A study of the order in which drugs were taken following the onset symptoms, showed that over 60 per cent of illnesses were treated only with non-prescribed drugs, therapy being started within 4 hours in 75 per cent of the incidents.

To what extent these findings would be reflected in

Great Britain probably cannot be judged without a similar survey—they surprised the American workers, and traditional British assumptions might also be proved wrong.

Recent proposals to look again at the whole future of general practice pharmacy require that such statistics and public attitudes are compiled, however.

The Pharmaceutical Society might usefully initiate such a long-term co-operative study between schools of pharmacy in different parts of the country.

Prices policy

The Green Paper issued by the Government this week on prices and pay is described as a "consultative document". The government are evidently feeling their way into the second stage of their anti inflation policy. By the end of this month a White Paper is expected to be ready giving the final version of price and pay code.

As we mentioned before when the "freeze" was initiated in November 1972, the standstill is unfair to those who have shown restraint whether that be in seeking more remuneration or in putting up prices. But it is not possible to behave like the proverbial ostrich with regard to the run-away inflation that would surely follow a relaxation of the pause at this stage.

On the question of profit margins much is made of the fact that SET is being abolished and profit margins should be reduced to compensate for this. Nothing, so far as we have seen, is mentioned of the enormous extra cost that value added tax is bringing to business, particularly the smaller businesses. There should be some appreciation of this in the Government's final document.

There is little gain for the "ethical" pharmaceutical manufacturer in the statement that "ethical" medicine prices will not be controlled. They already are controlled under the voluntary price regulation scheme which is to be in force for a number of years yet.

Presumably if a good case can be made out for considering extra costs for raw material, it will still be possible to raise the final price.

Letters

Mini-storm?

I see we have another 'witch-hunt' in progress—the 'hitherto unrecognised' dangers of excessive doses of vitamin A. Martin-dale 1952 page 303 lists several cases of hypervitaminosis A and it has been reported in each subsequent issue.

However it seems clear from the reports that it needs massive doses (several

100,000 units daily for an adult) and protracted treatment, usually several years, before the symptoms occur. Also recovering, described as 'dramatic', 'rapid', etc. seems to be the rule on discontinuing treatment.

If vitamin A is compared with almost any other drug, given in similar overdose for prolonged periods, eg, $\frac{1}{2}$ lb of epsom salts daily for 2 years, it will be seen that we have something of a storm in a thimble.

C. A. Pickford
Grantham

Business Q&A

I am not quite sure about interest. If I buy a car can I deduct all the hire purchase interest for tax purposes. You can obtain relief for a proportion of the interest related to the proportion of business use of the car. If you are a trader and have a bank overdraft, the whole of the bank interest is, in normal circumstances, an allowance expense.

Professional News

Pharmaceutical Society of Ireland

Council defers decision on 'NP' labelling for Health Service scripts

A proposal that pharmacists be asked to write the name of the preparation on the label of each container in the case of prescriptions dispensed under the general medical health services' scheme was deferred by the Council of the Pharmaceutical Society of Ireland at its monthly meeting in Dublin on February 13.

The call came from Mr M. F. Walsh who said he was concerned that the product should be immediately identifiable in the case of an emergency. It would be a responsible thing to do, with so many items appearing on the one prescription.

Mr Patrick Browne, agreeing, said it would be of great assistance to doctors in helping to identify tablets and drugs.

Mr T. R. Miller considered that some method of identification was absolutely essential in the case of lower-income, group prescriptions where no record number of the prescription appeared. He was unhappy that the name of the preparation should appear on the label, but was in favour of some identifying mark.

No difficulty

Mr H. P. Corrigan said he would object to any such proposal as under the present system there was not really any great difficulty in knowing what the prescription contained. He had adopted a simple routine which enabled him to identify any preparation in a matter of seconds.

Mr R. J. Power said that while accepting what Mr Corrigan and Mr Miller had said, he would be inclined to support Mr Walsh. What was involved was immediate identification, particularly in the field of psychiatric medicine. They must cater for doctors encountering emergencies late at night when pharmacists were not available to trace records in a hurry.

After further discussion it was agreed to defer the matter to a future meeting.

At the outset, the president, Mr R. J. Semple, reported that they were hoping to have discussions with the Department of Health in regard to drug abuse.

Expressing his disappointment at the fact that the Council had not been asked to express its views on the proposals before the Misuse of Drugs Bill had been circulated, Mr Walsh said they should insist in future on advance consultation in regard to all matters affecting pharmacy. This was EEC procedure.

Mr Tom McGuinn asked if any word had been received from the Department of Agriculture since the January meeting in regard to the implications of the Animal Remedies' Act?

The assistant registrar, Mr Cahill, said the decision at the last meeting was to bring Mr McGuinn's comments in regard to the Act to the attention of Mr O'Donnell, the Council's representative on the consultative committee under the Act.

Mr O'Donnell said he would like to discuss with Mr McGuinn his fears that the dividing of drugs into two categories under the Act would give rise to double standards in regard to the quality of veterinary drugs. He did not know if what Mr McGuinn had in mind came under the scope of the consultative committee.

Act silent on quality

Mr McGuinn said that a wrong impression might have been gained from what he had stated at the last meeting about veterinary drugs. He had not been referring to the sale of these drugs, already covered by the Act. If the drug was supplied by a veterinary surgeon, the Act was silent on the quality aspect. Consequently, he was concerned in case the quality of drugs supplied in good faith by veterinary surgeons might not be up to accepted standards.

Mr Miller agreed there should not be two standards of quality. The Council should ensure that the consultative committee was informed as they were responsible for the standards and efficacy of drugs. He did not see why animals should be subjected to a lower standard of efficiency in the quality of drugs supplied and he believed it was the Council's duty to draw attention to this matter.

The president reported that an eminent pharmacist, M Albert Verreydt (Brussels) was being invited by the Pharmaceutical Society of Great Britain to address meetings and he felt they should also invite him to Ireland.

Approving of this suggestion, Mr Walsh said the whole matter of drug qualities highlighted the fact that the Republic was the only EEC country which had not got proper medicines legislation. All they had was piecemeal legislation which was most unsatisfactory and he urged that an early meeting be sought with officials of the Department of Health in order to have proper medicines legislation introduced without further delay.

Mr Power said that while they all sympathised with Mr Walsh's views it was inevitable that medicines legislation had to come. This was laid down in the EEC draft directives. His only fear was that this piecemeal approach might not be as effective as comprehensive medicines

legislation and might not work out as envisaged.

It was agreed that the Council's working party established to look into the matter of drug abuse should keep in constant touch with the Department.

Mr Power said he was also concerned that no pharmacist had been appointed to the drug abuse committee.

It was agreed to send two representatives to the FIP Congress in Stockholm next September.

Mr Browne said the work of FIP was of vital importance and he suggested that a special committee be set up to help Mr O'Donnell, the Council's representative on FIP.

The president described as "very laudable" a letter from Mr P. S. O'Briain, MPSI, suggesting the drawing up of contingency plans to meet any emergency situation which might arise in the country. Mr O Briain had written that he was anxious that supplies of medicines and medical equipment should be readily available for any such emergency and that there should be a panel of pharmacists ready to operate on a voluntary basis in the event of such contingency.

The president said they were all in favour of having the necessary plans drawn up to meet any emergency or disaster and he could assure Mr O Briain that there would be no difficulty in having sufficient pharmacists to man any emergency stations. He thought the matter should be referred to the Hospital Pharmacists' Association and the Council could draw up a list of pharmacists willing to give their services.

Mr Browne, chairman, Hospital Pharmacists' Association, said they would discuss the matter and report back suggestions to the Council.

Mr McGuinn said he was amazed, on a recent visit to the continent, to observe the vast stocks of emergency supplies held in readiness in hospitals for any emergency. In contrast, the Republic had nothing in preparation.

Prescription forgeries

Arising out of the Law Committee Report, the inspector reported that a number of forgeries for drug supplies had been presented at Dublin pharmacies written on doctors' printed stationery, and which apparently had been stolen from doctors' surgeries.

It was agreed to give the maximum publicity to this report and to notify any doctors where it was suspected their notepaper had been stolen and prescriptions forged by the thieves.

It was also agreed to notify the Drug Abuse Council of the forgeries detected.

Satisfaction was expressed at a report by the inspector that all pharmacists visited by him during the month had been found to have been properly staffed and well conducted.

Mr Power stated that he had received a letter from the Irish Medical Association inviting him to attend their study conference on the General Medical Services at the Gresham hotel, Dublin, from March 2-4. The conference, which would deal with various aspects of the general medical services, would be officially opened by the president-elect of the association, Dr Vincent Doyle, and would be addressed by the Minister for Health.

When the treasurer, Mr Burrell, reported that the Society at present had an overdraft of £38,673, Mr Miller said the problem was that the Society was responsible for the education of pharmacists. He wondered if it would be possible to segregate the educational aspect from the administrative side? It was agreed to seek an interview with the Department of Education to point out the serious financial position in which the Society now found itself and to call a special meeting to discuss the position further.

Professor R. F. Timoney wrote regretting inability to attend as he was attending the annual meeting of the heads of Schools of Pharmacy. He explained that the agenda included a discussion on the EEC draft directive VII, the principal purpose of which was to bring about harmonisation of academic courses in Pharmacy.

The chairman of the practice of pharmacy committee reported that over £1,000 had been received from pharmacists to initiate an economic survey of pharmacy. It was agreed to proceed with the survey and to make a final appeal to those pharmacists who had not yet contributed to the scheme to do so immediately.

He thanked all pharmacists who had already contributed and paid tribute to the co-operation he had received from the representatives of the various regions. Even though only half of the target had been reached it was agreed to go ahead with the survey.

The committee also reported that it had been agreed to organise on a national scale the disposal of unwanted medicines

still held by pharmacists, in co-operation with the Department. The idea was that the medicines would be handed over for destruction and not re-distributed to any charitable causes. It was hoped to carry out the scheme as soon as possible.

It was agreed to provide community pharmacists with a table of drug interactions and the Registrar was instructed to obtain an estimate of the cost.

Register changes

Elected members were: Henry M. Ahearne, James B. Campbell, Elizabeth M. Cullen, Mary Lalor, Ann Lenihan and Catherine J. O'Flynn.

Mrs Mary E. Mullin, LPSI, was restored to the register; Mrs Mary D. Crowley (née Kiely), assistant, was granted a change of name in the Register.

The following changes of address were noted:— Mrs Mary Dillon, MPSI, to Strand Street, Kanturk, co Cork; Mrs Mary Henry, LPSI, to 23 Leopardstown Avenue, Blackrock, co Dublin; Mrs Catherine Cashman, Santoro, MPSI, to 17 Mount Argus Grove, Harold's Cross, Dublin 6; Miss Mary Buckley, MPSI, to 37 Northumberland Road, Dublin 4. Miss Josephine Lawn, LPSI, to 24 Braemor Drive, Churchtown, Dublin 14. Dr Anna B. Mullen, LPSI, to 14 Cavan Road, Cootehill, co Cavan; Miss Mary O'Donoghue, MPSI, to Rhodaville Pharmacy, Douglas Road, Cork; Miss Joan Waters, MPSI, to 91 Woodlawn Park, Ballysimon Road, Limerick; Mr John Dillon, MPSI, to Strand Street, Kanturk, co Cork; Mr John Gleeson, MPSI, to 111 Ardnacara, Mala-

hide, co Dublin; Mr James McElwee, MPSI, to 263 Roselawn, Castleknock, co Dublin; Mr Robert J. Magnier, LPSI, to c/o Seymour & Co (Ennis) Ltd, Medical Hall, O'Connell Street, Ennis; Mr Thomas F. Moran, MPSI, to 1 Hawthorn Avenue, Ballincollig, Cork; Mr Timothy O'Driscoll, MPSI, to c/o P. E. Kelly's Pharmacy Ltd, Slaney Place, Enniscorthy, co Wexford; Mr Patrick J. McGrath, RD, to 40 Lower Main Street, Dungarvan, co Waterford; Miss Maire McMahon, assistant, to 11 Carrickbrack Lawn, Sutton, co Dublin; Mrs Mary D. Crowley, assistant, to 228 Woodfarm Acres, Palmerston, Dublin 20. Mrs Catherine N. Walsh, LPSI, to 59 Ballymun Park, Dublin 11.

Aspirin curb by pharmacists?

The possibility that pharmacists might restrict sales of aspirin tablets to bottles of 25, was mentioned by Mr J. P. Kerr, president of the Pharmaceutical Society of Great Britain, on ITV on Wednesday afternoon. Kerr was taking part in a panel discussion on the "Good Afternoon" programme.

A doctor on the panel said "We are grateful to pharmacists for putting up the idea of a repeat prescription pad. The BMA is discussing it . . . but there are certain snags".

The programme discussed over-prescribing and hoarding of medicines—opening with a reference to the drugs handed in during Kent pharmacists' recent campaign.

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Statutory Committee orders three names to be removed from the register

Medicines more than ten years out of date were found in a Manchester pharmacist's dirty and dilapidated premises, the Statutory Committee of the Pharmaceutical Society heard during its three-day hearing last week.

The conditions at the pharmacy of Mr Israel Solomon Leon, FPS, at 227 Bury New Road, were a danger to the public, said Mr H. Littler, the Society's inspector for the Lancashire area. "This pharmacy is carried on in a manner unworthy of the profession. My hands were covered in black grime after handling some of the stock."

The Committee ordered that the name of Mr Leon, of Broom Lane, Salford, be removed from the register. He has three months in which to appeal.

'Aegean Stable'

The chairman, Sir Gordon Willmer, said the most apt description of the pharmacy and dispensary was that "it resembled the Aegean Stable." In 1971 the Committee had found Mr Leon guilty of misconduct following convictions for selling capsules without a prescription and selling pills of a substandard quality. On that occasion the committee adjourned their decision for 12 months to give Mr Leon an opportunity to "put his house in order".

Mr Littler told of four visits he made to the pharmacy, the last occasion only five days previously. The floor and shelves, and the stock on them, were covered with a thick layer of dust. There were empty bottles and rubbish of various kinds in the dispensary, and he found bottles containing antibiotics with expiry dates of 1959, 1965, and 1967.

Mr Leon told the Committee he had no intention of using the out of date medicines. He had kept them in case the manufacturers would change them for new stock. It was an exaggeration to say his pharmacy was filthy dirty. Because of ill health he had not been able to do all that he wanted, but during the past 18 months he had carried out work to improve the general condition of the premises.

The committee also ordered the removal from the register of Mr Alexander Shrager, 52 Kenyons Lane, Moston, who was described by the chairman as "a danger to the public".

Mr Shrager had been fined a total of £300, following his conviction by Cambridge magistrates in November 1972, of possessing 1,000 Ritalin tablets and attempting to obtain another 5,500 without authorisation. He had also been convicted of possessing Ritalin tablets in Oldham in July. The four counts at Oldham amounted to a total of 6,000 tablets.

Sir Gordon said the circumstances of Mr Shrager's actions were suspicious. "Anything more calculated to put a responsible pharmacist on inquiry cannot be

imagined. He asks us to believe that he is completely innocent throughout. He says he did not get any monetary gain but that he did it out of the kindness of his heart. I am driven to the conclusion that we have not heard the whole truth about this case."

He said that Mr Shrager had contradicted himself in the answers he had given to the police "and before us in the witness box he did not inspire our confidence in him in the answers he gave."

In evidence, Mr Shrager said a former acquaintance rang him and asked him to get "as many Ritalin tablets as I could".

"They meant nothing to me. They were ordinary tablets as far as I was concerned. I did not know they were a drug of addiction."

The third name to be removed from the register was that of Mr Frederick Nichols, Fembrook Close, Hembrook, Bristol. He was said to have sold ergometrine tablets, without prescription, to women customers who wanted to terminate their pregnancies.

The Committee allowed his company—C. Kembuey (Chemists) Ltd, 7 High Street, Kingswood, Bristol—to continue as authorised sellers of poisons after Mr Nichols had told them that there might only be two chemists serving the area in the near future.

Called to account

Mr Nichols appeared before the Committee following his firm's conviction by Bristol magistrates in November last year for selling poisons not authorised on prescription. He was also called to answer allegations that he could not account for 337 ergometrine tablets, and that he was careless or negligent in carrying out his duties as superintendent pharmacist for the company.

The Society's chief inspector, Mr J. Dale, told the Committee that at a British Medical Association conference a doctor handed him some pills given to him by a woman patient who had bought them at Kembury's. Mr Dale said Mr Nichols at first denied selling the drug without a prescription. A check of the poisons and prescriptions books revealed that in the last two years 13 tablets had been dispensed for veterinary purposes. There were 50 ergometrine tablets in stock while invoices showed that 400 had been delivered to the shop between November 1971 and April 1972. "He did not give me an explanation for the deficiency", said Mr Dale.

"It was implicit in our conversation that these tablets were being sold in the district to women who were pregnant. This was presumably implying something to do with ending pregnancies", added Mr Dale.

Mr Nichols, in a statement to the Committee, said that there was one doctor in the area who frequently prescribed the

drug to regulate periods when women could not take the "pill". He admitted that he knew that the drug was available only on prescription and that he knew its abortive qualities. The only explanation he could give for the 337 missing tablets was that they were either not delivered or lost in the shop after delivery.

Sir Gordon Willmer said "It seems to us that the matter is so serious that it cannot be dealt with in other way than his being struck off the register."

All the pharmacists ordered to be struck off have three months in which to appeal.

The Committee administered a severe caution to Mr Barry Bladon, 17 Park Drive, Hale, Cheshire, who owns a pharmacy at 474 Bury Old Road, Prestwich, Manchester. The hearing followed a conviction at Strangeways magistrates court, Manchester, in August 1972, on two charges of selling medicines containing therapeutic substances while unauthorised.

"Mr Bladon assures us that he has now put his house in order," said Sir Gordon. "But we cannot overlook the offence, especially as it followed a previous occasion where a similar offence was committed."

No pharmacist

Mr Alexander Campbell Douglas, High Street, Hitchin, and E. E. Russell (Chemists) Ltd, Whitehorse Street, Baldock, of which he is the superintendent pharmacist, appeared before the committee following the company's conviction in 1972 of 14 offences relating to selling medicines containing poison without the supervision of a pharmacist, failing to label some of them properly and supplying sulphamezathine without a prescription.

Mr P. St John Howe, the Society's solicitor, said since May 1970 an inspector of the Society had been concerned about the fact that from time to time he had not seen a pharmacist in the Whitehorse Street premises, and he had warned Mr Douglas. Subsequently test purchases were made when there was no pharmacist supervising the sales.

It was fair to say, he added, that the pharmacist who made the sale of the therapeutic substance might have overlooked the change in regulations in the past two years which now made a prescription necessary.

Mr Douglas told the Committee he was deeply sorry for the mistakes and had now taken steps to ensure that there would be no recurrence. At the time the offences were committed there was a staff shortage and he was acting as stand-in pharmacist while working in the company's offices next door. He could have been called by an assistant.

The chairman said although the offences were serious they were not very flagrant ones. Mr Douglas was given a severe caution.

A pharmacist said to have tried to do too much in his business and to have left his premises at times without a pharmacist in control, was also cautioned.

Mr Henry Withnal Wain, Tides Reach, Wharnclyffe Road, Highcliffe, superintendent chemist of H. Withnal Wain Ltd, High Street, Christchurch, Hants, admitted that the company was convicted in July 1972 for selling a cough mixture con-

aining poison in the absence of a pharmacist.

Mr Howe told the Committee that the case was "really about a man who has tried to do far too much". In addition to his normal dispensing Mr Wain had an unusually high supply of oxygen to NHS patients and carried on an optical practice. Mr Wain also had to visit the company's Andover premises. The medicine was sold by an unqualified assistant to an agent of the Society in a test purchase while Mr Wain was delivering oxygen cylinders.

Mr E. Hunt, a Society's inspector, said Mr Wain had told him that he dealt with 200 prescriptions a month, delivered about 30 oxygen cylinders a week, and carried out about 40 optical tests a week.

Mr Wain said although he preferred to deliver the oxygen cylinders to patients himself he had now arranged with a taxi service to deliver them during the day. So far as his optical testing was concerned this was done in close proximity to the dispensing department and it was easy for the staff to call him.

Sir Gordon Willmer told Mr Wain that the Committee thought he had learned his lesson.

Five offences

The Committee reprimanded Mrs Marjorie Williams, Poyston Hall, Haverfordwest, a director of Williams Chemists (Tenby) Ltd, who was convicted in March 1972 for four offences of selling poisons and a further offence of not putting the

pharmacy's name and address on the container of a poison.

She had been called to answer allegations that on a number of occasions her Tenby branch shop was left without a pharmacist, that her Tenby and Haverfordwest branches did not have a pharmacist in personal control at all times, and that she was careless or negligent, in her duties as pharmacist director.

The Committee heard that in July 1971 Mrs Williams told the Executive Council that she could no longer dispense NHS prescriptions from her Warren Street, Tenby, branch.

In September 1971 a pharmacy inspector called to check on the security of the shop and the disposal of the poisons. He found the name "chemist" was still over the door and the pharmacy still contained poisons. A test purchase of poisons was made and a prosecution followed.

In November 1971 Mrs Williams closed the Haverfordwest branch for all business and in January 1972 the Tenby branch became a drug store.

Mrs Williams told the Committee that when the test purchases were made an assistant had opened the shop. Her husband, who was to have looked after the business that day and knew which drugs he could not sell was delayed by his car breaking down. Mrs Williams said she did not intend opening as a pharmacy in Tenby in the foreseeable future.

In two further cases the committee adjourned the inquiries for a year, and in another two to take no further action.

Oral contraceptives

Concluded from p271

one year than it is to be exposed to one pregnancy and childbirth.

Provided women contemplating the use of oral contraceptives are made aware of the possible risk involved, and provided women known to be at special risk are screened out, then so long as proper medical supervision is maintained the contraceptive pill provides a relatively safe, convenient and highly effective means of avoiding an unwanted pregnancy.

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Controlled preparation sold in Dublin 'supermarket with a pharmacy'

Summoned by the Eastern Health Board in Dublin District Court on February 3, Tru-Valu Ltd., 40 Grafton Street, Dublin, were fined £25 and costs by District Justice Kearney for having, on October 6, 1972, sold a controlled preparation without a medical prescription, and through an employee who was not a pharmaceutical chemist or a dispensing chemist and druggist, contrary to the Medical Preparations (Control of Sale) Regulations 1966.

An inspector of the Pharmaceutical Society of Ireland gave evidence of having purchased a quantity of Villescon tablets in the premises which he described as "a supermarket with a pharmacy at the far end". Cross-examined by Mr O Brolchain he said the tablets were on display on an open shelf in a department where the public could help themselves. He had not spoken to the person in charge beforehand.

Society's activity

Mr P. Cummins, the inspector, said that Mr Donal O'Sullivan, a pharmacist, was manager of Tru-Valu Ltd. The Pharmaceutical Society kept its members up-to-date on drug developments and circulated them, free of charge, with a list of controlled preparations. The tablets were found to contain prolintane hydrochloride. The preparation was listed as controlled in the Society's guide, was in Part A of the First Schedule, and should be dispensed only on prescription.

Mr Cummins said he had always found Mr O'Sullivan co-operative. He had examined the premises on previous occasions and had not found anything amiss in the pharmacy section. Mr O'Sullivan told him he had no control over the supermarket section.

Shown copies of *Mims* and the IDA Price List, he agreed that the preparation was not marked as scheduled, but explained that the IDA List was not an official publication and *Mims* was a publication circulated to doctors.

The preparation was listed under the Medical Preparations (Control of Amphetamines) Regulations 1969, and its sale was banned even on prescription, except under special licence from the Minister for Health. Mr Cummins explained that the preparation had subsequently been removed from the 1969 Regulations but still remained a controlled preparation under the Medical Preparations (Control of Sale) Regulations, 1966.

Mr O. Brolchain: "So that unless you actually know . . ."

Mr Cummins: "Pharmacists are supposed to know."

Mr O'Sullivan in evidence said he had been practising as a pharmacist since 1932 and had operated his own pharmacy in Merriam Road, Ballsbridge, from 1935 until 1971. He had come across Villescon

tablets and remembered them being controlled under the Amphetamine Regulations, 1969. They had been subsequently released from this Act. To the best of his memory he did not think pharmacists ever received a directive from any responsible body or from the manufacturers advising them that they were still subject to control under Schedule 1A.

Mr O Brolchain: What guideline did you use to decide whether this commodity was a controlled preparation or not?

Mr O'Sullivan: "I knew most of them, but due to the fact I did not receive any directive I accepted it could be sold after it had been released from the Amphetamine Regulations."

Mr Rooney, solicitor, for the Eastern Health Board, asked how he became aware that the tablets were taken off the total prohibition list?"

Mr O'Sullivan: Another chemist informed me."

Mr Rooney: "There were quite a number of preparations on that total prohibition list. Equally, quite a number were taken off it and transferred to prescription."

Mr O'Sullivan: Villescon was the only outstanding one I remembered.

Mr Rooney: "Do you say, as the only qualified chemist in Tru Valu that you will authorise their sale in a supermarket, based merely on memory?"

Mr O'Sullivan: "I am not the only chemist. Mr O'Grady is a qualified Assistant."

Mr Rooney: "He is not a qualified pharmacist, so that at that particular time you say you were the only person to whom your employers would look for advice as to what medicines could be put on supermarket shelves."

Mr O'Sullivan: "Yes."

Double check

Mr Rooney: "As a responsible chemist, before you put medicines in a shop for anybody to walk in and buy them, would you not have thought it a responsible thing to make a double check, when this was a business, not like your own pharmacy, from which it was a complete change?"

Mr O'Sullivan: "Mr Cummins visited me on at least three occasions."

Mr Rooney: "You are dealing with the pharmacy. We are dealing with the supermarket."

Mr O'Sullivan: "When I left on my holidays in October Villescon was in my area. It was not on the self-service shelf."

Mr Rooney: "So that if it got on the supermarket shelf, somebody other than you put it there?". Mr O'Sullivan said Mr O'Grady was deputising for him when he was away. He did not think he would have concurred in its removal.

Mr Rooney: "Will you agree there is

more need for very strict care in an establishment like Tru Valu than possible where a chemist is working in his own shop?" Mr O'Sullivan agreed and said all controlled preparations were under lock and key.

He said he considered himself a conscientious pharmacist but submitted there was no complete list available to pharmacists giving all the controlled preparations.

Mr O Brolchain said the company and Mr O'Sullivan had endeavoured, by constant association with the Pharmaceutical Society of Ireland to ensure that the pharmacy section was run properly. The fact clearly established that an error had been made—a *bone fide* error. Mr O'Sullivan had made the error of assuming, after the total ban had been lifted, that the preparation had reverted to the pre-1966 position instead of the pre-1969 position.

Mr Rooney said they were not dealing with a normal pharmacy where the chemist was in absolute control of what was in the shop, but with a self-service supermarket where the public were invited to go to the shelves and take preparations they saw advertised on television. Greater care would have to be taken to see that all Regulations were complied with. Mr O'Sullivan was well aware of the dangers and he suggested that a fine should be imposed that would ensure that the Regulations were observed strictly in future.

The Justice said that in previous inspections Mr Cummins was obviously satisfied with the control situation but there had been a slip-up on this occasion. He did not think the question of maximum penalty was in issue. It was a slip-up perhaps because Mr O'Sullivan had got a wrong answer from a colleague.

Irish Union meet for the first time

The co-ordination chairman of the Irish Pharmaceutical Union, Mr T. R. Miller, spoke of "the great privilege and responsibility" which each delegate carried when he addressed the first meeting of the executive of the new Union in 27, Merrion Square, Dublin, last month.

Welcoming the delegates, Mr Miller pointed out that they were involved in the making of pharmaceutical history. It was the first time that pharmacists from every sector had come together to work, not alone to help themselves, but to advance and uphold the well-being of pharmacy.

After a comprehensive discussion regarding the election of president it was the feeling that since the present executive would hold office for one year only as a caretaker committee, it would be better to defer the selection until an executive committee was duly elected. However, it was agreed that Mr Miller be elected chairman for one year.

Financing of the Union provoked a detailed discussion and it was decided to appoint a sub-committee to investigate all aspects of this problem and to report back. The following committee was agreed: chairman, Mr Miller; Messrs. O'Sullivan, Cummins, Kissane and Commandant O'Farrell.

A report from the delegates to the pharmacy group of the EEC on progress

-date was considered. The salient message emerging was that the Union had been established at an opportune time. While there are ten directives dealing with the practice of pharmacy, only one deals exclusively with community pharmacy. In fact, it was pointed out, directive 2, which is foremost at the moment, deals with the industrial manufacturing section. The executive, it was stated, was keeping a very close watch on all developments.

A letter from the Hospital Pharmacists' Association indicated that this group had recently joined another union and consequently did not consider it appropriate to nominate delegates to the pharmaceutical union. The chairman was authorised to invite the Association to name three

members as observers to meetings of the executive, without any commitment.

Present were: Messrs. Charles Ward (Western region); John de Loughrey (Mid-Western region); Richard Shanahan (Southern region); R. J. Power (Eastern region); John Nolan (North Eastern region); Sean O'Dwyer (South Eastern region); Austin Gleeson (Midland region); John Burke, John Kennedy, Declan O'Sullivan and R. C. O'Higgins (community pharmacists' section); Commandant O'Farrell and Mr P. Cummins (administrative and army section); Michael Martin and Maurice Kissane (industrial and wholesale pharmacists' section). Apologies were received from Mr John Duffy (North Western region) and Mr Val Hart (administrative and army section).

Postgraduate courses

The director of the postgraduate education committee of the Pharmaceutical Society of Ireland, Mr D. W. P. Boyd, reports the following engagements for March and the following months:

March 6-8: Course in Physiology and Pharmacology, Dublin, 3rd Seminar; Lecturer—Michael Whelan, BSc (Pharm), MPSI.

March 6-8: Course in Veterinary Medicine, Limerick, 1st Seminar; Lecturer—Paul Egan, MA, MVB, MSc, MRCVS;

March 12: Symposium on Drug Interactions, Limerick; Dr Patrick B. Deasy, BSc (Pharm), MPSI, and Dr John T. Leahy, MRCPI. Sponsored by Roche Products Ltd.;

March 15: Lecture by Professor A. H. Eckett, DSc, PhD, FRIC, FPS. "Progress in Drugs—Boon or Curse". (Sponsored by

the postgraduate education committee); March 20: Symposium on Drug Interactions, New Ross. (Sponsored by Roche Products Ltd);

March 20-22: Symposium on Physiology and Pharmacology, Claremorris, co Mayo. Speakers: Dr B. J. O'Driscoll (dermatology), Dr Phelim Donnelly (analgesics), Dr Conn Lucey (cardiology), Dr C. F. McCarthy (paediatrics), and Dr M. J. Sarsfield (psychiatry). The concluding dinner will be sponsored by Burroughs Wellcome & Co;

March 27-29: Course in Veterinary Medicine, Limerick; 2nd Seminar. Lecturer: Paul Egan, MA, MVB, MSc, MRCVS;

April 10-12: Course in Physiology and Pharmacology, Dublin, 4th Seminar. Lecturer: Michael Whelan, BSc (Pharm), MPSI.

Westminster report

No EEC fines

Mr L. Pavitt asked what fines had been imposed on British pharmaceutical manufacturers under articles 85 and 86 of the EC Treaty.

Sir Geoffrey Howe, Minister for Trade and Consumer Affairs, replied that no fines had been imposed on pharmaceutical companies in their capacity as such. The Government was not responsible for administering the community's rules of competition and had no knowledge of the total amount of fines imposed. "But my Department provides British companies with information and advice on the rules".

Free prescriptions for schoolchildren?

More than 60 Members of Parliament—Conservative and Labour—have tabled Parliamentary motion calling for free prescriptions for all school-children. The motion states "That this House is

deeply concerned that the Government feels unable to grant free National Health Service prescriptions to all children up to 16 years of age who are attending school; and calls upon the Government to grant this concession as soon as possible".

Second reading fails

The Multi-Level Marketing Bill, the Private Member's measure sponsored by Mr Ray Mawby which seeks to regulate pyramid selling, failed to get a second reading in the Commons on February 23.

Four meetings on hexachlorophane

Mr L. Pavitt asked the Home Secretary when he commenced consultation on the use of hexachlorophane in non-medical toilet preparations; how many meetings had been held and when he expected to conclude his inquiries.

Mr David Lane, Under Secretary, replied "Consultations by the Home Office began in October last year, and, apart from interdepartmental discussions, four meetings have so far been held. The determination of limits for hexachlorophane in relation to the wide range of products and different applications involved is a complex matter, but we are making every effort to reach a decision soon."

Coming events

Monday, March 5

Stockport Branch, Pharmaceutical Society, Postgraduate medical centre, Macclesfield, at 8 pm, Mr J. D. Bloom on "Medical and ancillary services available locally".

Tuesday, March 6

Sheffield Branch, Pharmaceutical Society, Royal Victoria Hotel, Sheffield, at 8 pm. Miss J. Edwards (Peak Park Planning Board) on "The Peak Park" (wives, husbands and friends invited).

York City Branch, National Pharmaceutical Union, Elm Bank Hotel, The Mount, York, at 7.30 pm. Mr E. J. Downing (assistant secretary, NPU) on "VAT".

Wednesday, March 7

Brighton and Hove Branch, Pharmaceutical Society, Postgraduate medical centre, Brighton General Hospital, Elm Grove, Brighton, at 7.30 pm. Dr P. Shave (deputy medical officer of health) on "The work of the health department".

School of Pharmacy, University of London, Brunswick Square, London WC1, at 3 pm. Ceremony to commemorate the foundation of the School in 1842. Professor C. H. Phillips (vice-chancellor) on "The idea of the modern university".

Swansea and West Glamorgan Branch, Pharmaceutical Society. Visit to H. G. Lewis Photographic Laboratory, Old Road, Neath Abbey.

West Metropolitan Branch, Pharmaceutical Society, Great Western Royal Hotel, Paddington Station, London W2, at 7.45 pm. Dr N. D. Harris (reader in pharmaceuticals, Chelsea College) on "Control of microbiological contamination in pharmaceuticals".

Worthing and West Sussex Branch, Warnes Hotel, Worthing, at 7 pm. Dinner and dance.

Thursday, March 8

Birmingham, Coventry, Warwickshire and West Midlands Branches, National Pharmaceutical Union, Imperial Hotel, Temple Street, Birmingham, at 7.45 pm. Mr T. P. Astill (deputy secretary, NPU) on "VAT".

Durham County Branch, Pharmaceutical Society, Three Tuns Hotel, Durham City, at 8 pm. Dr J. Crossland (School of Pharmacy, Nottingham University) on "Lessons of history".

Glasgow and West of Scotland Branch, Pharmaceutical Society, McCance Building, University of Strathclyde, Richmond Street, Glasgow, at 7.45 pm. Mr G. Calder (regional pharmacist, Birmingham) on "Hospital pharmacy 1973".

Society for Analytical Chemistry, and Analytical Division, Chemical Society, Pharmaceutical Society's House, 17 Bloomsbury Square, London WC1, at 2.30 pm. Dr I. Martin (The Wellcome Foundation) on "The rationale of control of sterile areas".

Advance information

Birmingham Pharmaceutical Association, Botanical Gardens, Edgbaston, at 7.30 pm. Annual dinner and dance, March 14. Ticket £3.25, from Mr K. S. Brown, 54 Hannon Road, Birmingham 14.

Rhanbarth de Cymru Branch, Pharmaceutical Society, Ivy Bush Hotel, Carmarthen. Dinner, March 24. Ticket £2.50 from Mr P. Jenkins, 10 Woodland Crescent, Abercynon, Glamorgan.

Southampton Branch, Pharmaceutical Society, University of Southampton. Refresher course for pharmacists on colostomy, arthritis, and diabetes. First lecture, March 15. Full details from Mr C. M. Albany, 2 Rowan Close, Whitenap, Romsey, Hampshire.

Market News

SPANISH OILS UP

London, February 28: Several Spanish essential oils have been marked up as a result of both scarcity and the currency situation. Lavender spike is now at £4.25/kg against £2.35 recently. Rosemary has gone up to £2.50/kg and sage to £3.10.

Among crude drugs buchu was a little firmer at origin; Mexican jalap was £25 metric ton dearer and Chinese liquorice £12 up at £82 for shipment with a corresponding rise for spot supplies. Agar is virtually unobtainable while gentian root was easier.

Production of sulphuric acid by members of the National Sulphuric Acid Association during 1972 totalled 3,449,296 metric tons. That was 1.3 per cent up on 1971. Consumption was 3,819,611 tons (up 1.7 per cent).

Pharmaceutical chemicals

Acetic acid: 12-ton lots, delivered, per metric ton, BPC glacial £94; 99.5 per cent technical £87; 80 per cent grades pure £82.50; technical £75.

Aloin: 50-kg lots £9 kg.

Aminacrine hydrochloride: £33.50 kg.

Ammonium bicarbonate: £55 metric ton delivered; carbonate lump and powder £88.20.

Aspirin: 10-metric ton lots £577.50 ton; 5-ton £583; 1-ton £592.50.

Atropine: (500-kg lots per kg) alkaloid and methonitrate £65.20; methylbromide £64.20; sulphate £52.90.

Barbitone: 50-kg lots £2.65 kg; Sodium £2.65.

Bemegride: BPC £16 kg.

Benzamine lactate: 1.5 kg lots, £95 kg.

Benzocaine: 50-kg lots £1.48 kg.

Benzoic acid: One-metric ton lots £30.42 kg.

Bismuth salts: £ per kg.

	12½-kg	50-kg	250-kg
carbonate	5.38	5.20	5.15
Salicylate	4.53	4.30	—
Subgallate	4.83	4.60	—
subnitrate	4.87	4.65	4.60

Borax: BP grades, per metric ton, in paper bags delivered—granular £112; crystals £154; powder £122; extra fine powder £126. Technical grades less £24 per ton.

Boric acid: BP grade per metric ton; granular £110; crystals £154; powder £122; extra-fine powder £126 in paper bags, carriage paid. Technical is £24 per 1,000 kg less than BP grades.

Bromides: Crystals (£ per kg).

	12½-kg	50-kg	250-kg
Ammonium	0.52	0.43	0.40½
Potassium	0.47	0.38½	0.36
Sodium	0.46	0.38	0.35½

*Powder plus £0.02.

Caffeine: (50-kg) Anhydrous and hydrate £1.78 kg.

Calamine: BP is £297 metric ton for 250-kg lots.

Chloroform: BP from £258 metric ton in 280-kg drums to £310 in 35-kg drums; 500-ml bottles £0.44 each.

Cantharadin: £75 per 100 g.

Calcium carbonate: BP precipitated £49 per metric ton.

Calcium gluconate: 250-kg lots £0.63 kg.

Calcium lactate: 250-kg £412 per metric ton.

Calcium pantothenate: £3.16 kg; 5-kg £3.13 kg.

Calcium sodium lactate: £0.709 kg in 50-kg lots.

Carotene: Suspension 20 per cent £16.73 kg.

Chloral hydrate: 50-kg lots £0.75 kg.

Citric acid: BP granular hydrous per metric ton 50-kg lots, £337; 250-kg £325; 1,000-kg £313.

Anhydrous £358, £346, £334 respectively. Premium for powder £10.

Gallic acid: 1,000-kg lots £1.68 kg.

Glucose: (per metric ton in 10-ton lots), monohydrate powder £84; anhydrous £165; liquid Baumé £70 (5-drum lots).

Lactic acid: £570 metric ton for 50-kg lots.

Magnesium carbonate: Heavy £192; light £184 metric ton.

Magnesium hydroxide: BPC £560 metric ton.

Magnesium oxide: BP (per metric ton); light £560; heavy £890.

Magnesium peroxide: £50-kg lots 23-25 per cent £0.59 kg.

Magnesium sulphate: BP from £42 metric ton exsiccated £75-£80 ton, ex works.

Magnesium trisilicate: £470 metric ton.

Oleic acid: BP £206.70 per metric ton delivered.

Oxalic acid: 20-ton lots about £145 metric ton.

Pyrogalllic acid: Pure 500-kg lots £4.92.

Sodium citrate: £313 per metric ton.

Sodium perborate: (Per 1,000 kg) monohydrate £283.50—tetrahydrate £145.75.

Sodium percarbonate: (Per metric ton) £170.75.

Sodium potassium tartrate: £295 per metric ton.

Sodium salicylate: Per kg in 5-metric ton lots £0.54; 1-ton £0.55; 250-kg £0.56½; 50-kg £0.59.

Sodium sulphate: BP from £35 to £40 per metric ton as to crystal, BP exsiccated £60 ton.

Sodium thiosulphate: £50 per metric ton.

Tannic acid: 500-kg fluffy £1.40 kg; powder £1.10.

Tartaric acid: (Per metric ton) 50-kg lots £511.25; 250-kg £506; 1-ton £497.50.

Thymol: In 1-ton lots £2 per kg.

Zinc carbonate: BPC 25-kg sacks £0.25 kg.

Zinc chloride: Granular 96-98% £140 metric ton.

Zinc sulphate: Heptahydrate £54 metric ton.

Crude drugs

Agar: (lb) Nominally £3.50 kg.

Buchu: Spot cleared; shipment £2.20, cif.

Cinnamon bark: Seychelles £420 ton cif.

Cochineal: Tenerife black-brilliant £6.80 kg spot.

Peruvian silver grey: £5.75 spot.

Gentian: Root £490 metric ton spot.

Ginger: (ton) Cochin, new crop £310, cif. Jamaica can not quoted Nigerian split £335, cif, peel £435, cif. Sierra Leone, withdrawn.

Jalap: Mexican tubers £1,500 metric ton.

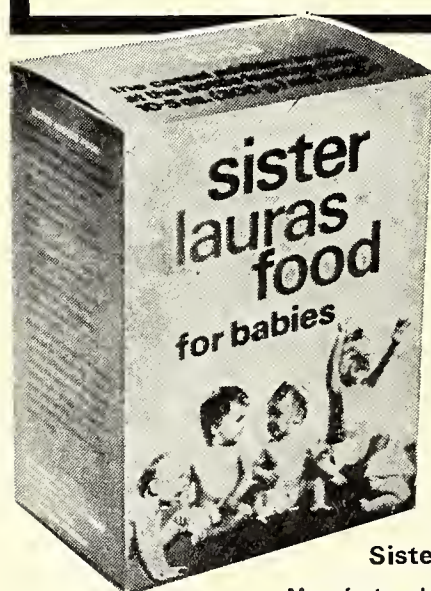
Liquorice root: (metric ton) Chinese £115 spot.

£82, cif. Russian £120 spot, £80, cif.

Pepper: (ton) Sarawak black £435, cif; white £630, cif.

Turmeric: Madras finger £220 ton; £210, cif.

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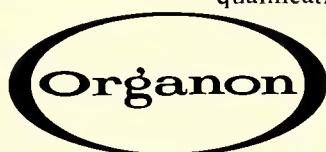
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Wanted

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Horatio had a good eye for profitable action

(But no stomach for the sea)

You can't afford to turn a blind eye to Kwell's profits. That's why you'll find Nelson selling Kwells hard in a heavyweight advertising campaign in women's magazines during Easter and peak holiday periods.

Quick Kwells is the established brand leader among travel sickness remedies. Contact your Nicholas representative for details of this season's special money-making deal.

- Based on hyoscine hydrobromide, medically recognised as effective for all forms of travel sickness
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- Choice of leading airlines
- Standard item in Ministry of Defence survival rafts



A Nicholas  Product

KWELLS

The best selling answer you have to travel sickness

Supplement to Chemist & Druggist March 3 1973

Beauty Business



Hair
colouring
special



New! Wood Nymph solves all the traditional problems of going blonde. It couldn't be simpler! And creates a new one— which of the new light blondes to choose.

Wood Nymph is the simplest, surest way of going blonde. Silky, shiny blonde. And the new shades are lighter and silkier than ever. You'll want more than our word for it. So here are some facts.

Fact 1: Going blonde is a big decision.

Lightening is permanent. So if you don't like what you get, you're more or less stuck with it. We've made Wood Nymph as simple, predictable and foolproof as possible. With its choice of four blonde shades, its exclusive applicator and clear instructions, we honestly believe it's the most practical help a blonde ever had.

Fact 2: All lighteners bleach colour out of your hair.

Unless carefully controlled colour is put back into your hair, you end up brassy blonde. Hence the Wood Nymph toners. They put back the cool colours of natural blonde hair. They also let you choose the blonde you want to be. The new shades are paler, and they have new toners: long-life toners that keep your blonde cool and natural-looking from one Wood Nymph to the next. Brassiness problem solved!

Fact 3: All lightened hair needs retouching from time to time.

As your hair grows, the natural colour starts to show at the roots. It's usually about a month before you need to do anything about it. And then you'll find how clever Wood Nymph's



applicator is. Make a parting, run the sponge head along it, and you'll find it's specially designed to treat the average month's regrowth. It's almost automatic. Retouching problem solved!

Fact 4: Your own hair colour decides how blonde you can be.

You won't change dark brown hair to pale silvery blonde, but if your hair is mid-brown or lighter, you can choose the blonde you want from the chart on the Wood Nymph pack. In fact, your only problem with Wood Nymph will be deciding which new blonde to choose.

Natural Hair Colour	Wood Nymph Shade	Result
Fair to dark blonde	Oat	Pale Honey Blonde
	Birch	Pale Silvery Blonde
	Ash	Pale Ash Blonde
	Tawny	Pale Beige Blonde
Light brown to mid-brown	Oat	Soft Honey Blonde
	Birch	Soft Silvery Blonde
	Ash	Soft Ash Blonde
	Tawny	Soft Beige Blonde

Fact 5: Some lighteners leave hair very dry.

In the past, blondes suffered more than most from dry, out-of-condition hair. So Wood Nymph is specially formulated to help condition hair, to make your blonde hair silky, shiny and manageable. Condition problem solved!

Fact 6: It's easy to change from ordinary lighteners to new Wood Nymph.

If you're already using a bleach or lightener, Wood Nymph makes it easy to change to a subtle new shade. When Wood Nymph users have retouched roots and waited 20 minutes, they add water and "shampoo" with the lather. You do the same. Wood Nymph's special new

long-life toners even out the difference between your old blonde and your new, to give all your hair the subtle shade of blonde you've always wanted. Everything you need to go silky, shiny blonde is in the Wood Nymph packet.



The complete lightener



C & D's unique symposium

Manufacturers pool their knowledge to help the chemist's assistant

This Beauty Business has a new look—the Hair Colouring Special. Hair colouring used to be considered a notoriously complex subject and one which too many people dismissed by saying, "it's best to leave it to the professionals". But that no longer applies to today's modern woman, whose only problem when it comes to colouring her hair should be the product to choose from the huge—and sometimes bewildering—range available. And this is often where the assistant needs help too.

The general concensus among those assistants we talked to seemed to be that the more help and information—in everyday terms that is—we could give the better. We decided to approach the people most concerned and invited eight of the leading hair colourant manufacturers to send technical representatives along to our symposium on the subject. And what a controversial subject it proved to be—with the conference lasting a whole afternoon, and at times looking as if it would go on into the night!

It was a unique conference, and we believe the first time that eight of the leading hair colourant manufacturers had come together in one room to talk freely on their special subject. The results of the conference easily filled this issue in which we have tried to answer most—if not all—the questions likely to be asked. Keep it near the hair colourant section, ready for quick reference when advice is sought.

Not only hair

The great advantage about cosmetics today is that no woman need remain dissatisfied with her appearance for long. And particularly with the colour of her hair. Whether it's flaming auburn or just a subtle 'lift'—the choice is hers. Many women, however, make the mistake of stopping at a new hair colour—not realising that very often a change of makeup is needed too. That dark, bold eye makeup that went well with mid-to dark brown hair can entirely spoil the effect of a new dark blonde hair colour. And it's not only eye makeup that is a stumbling block, but the choice of foundation, lipstick and blusher. An attractive new hair colour deserves a new makeup; and this is a point that could be made more often at point of sale, especially

with the more dramatic changes of colour.

In the pink

The big news, makeup wise, at the moment is pink—and every variation of the colour possible. Most of the cosmetic houses have introduced a "pink theme" with classic femininity still the overall image. This is reflected in such new ranges as Miners Posh Colours and Snobs eye kits; Coty's Frosted transparent shades; Elizabeth Arden's "Just Peachy" face which is a natural look with the slightly pearly sheen; the "Rosalinda" look created by Douglas Young of Max Factor who used pink lipstick, pink blusher and pink eye-shadows teamed with subtle blues and fresh greens; and Revlon's Natural Wonder "New York" look which they describe as "natural sophistication with overall brightness and shine".

Musk on its own

It doesn't often happen that a single fragrance sweeps the country, but in the United States Musk perfume seems to be doing just that. This perfume has now been launched in the UK, and by more than one company, such is their faith in its potential.

Musk itself is not new. It was first used in India and China many centuries ago, mainly as a fixative in other perfumes. It is a secretion from the male musk deer found in the mountains of Tibet, China and Northern India, and has been claimed to have aphrodisiac qualities (for the female deer?!)

The various interpretations of Musk that have so far been launched include R. H. Mystic Musk Oil distributed by Natura Products Ltd; Musk Oil in 4oz perfume spray bottles from the Alyssa Ashley Division of Houbigant Ltd; Wild Musk in two presentations from Max Factor and now, Skin, from Bonne Bell Cosmetics Ltd, which is a musk scent for either sex.

Some of the manufacturers (right and above) discussing points raised at C&D's conference



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Editor: A. Wright

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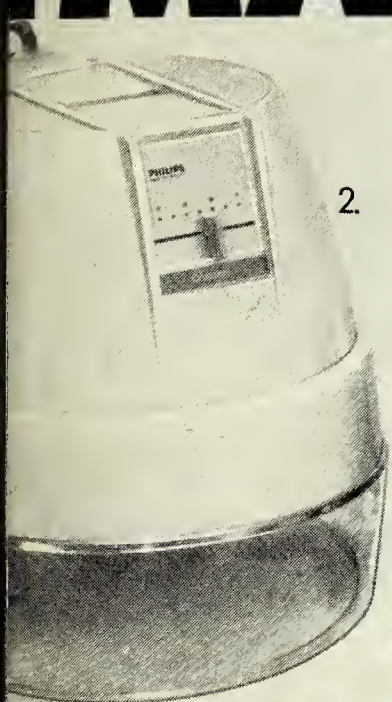
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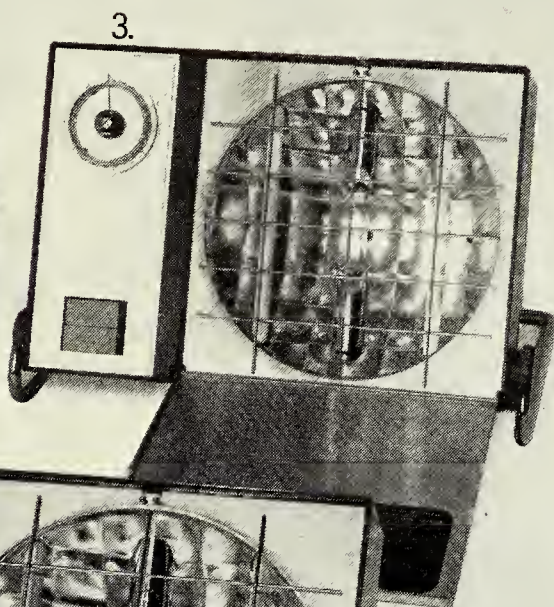
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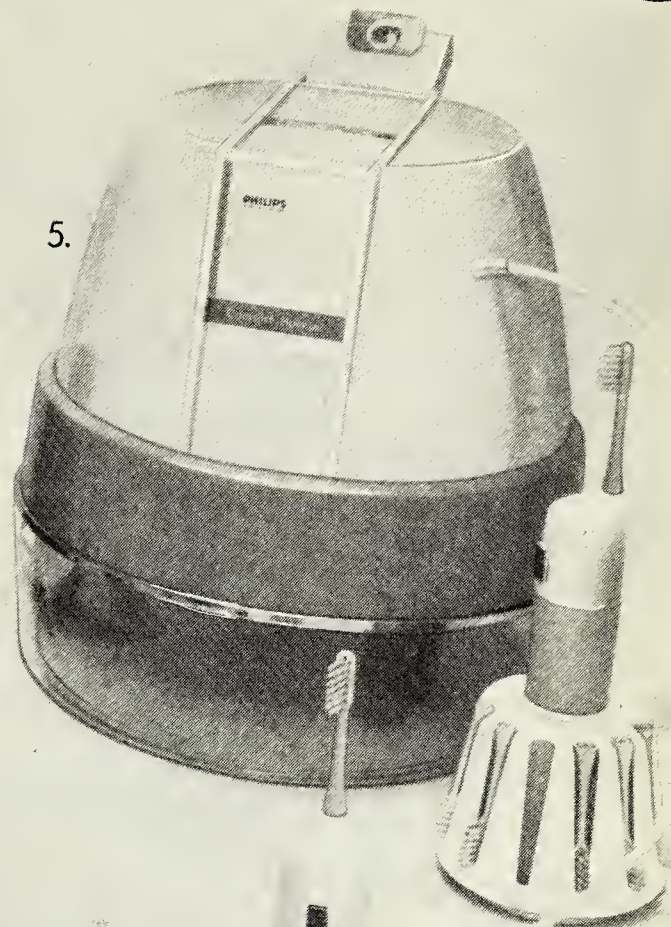
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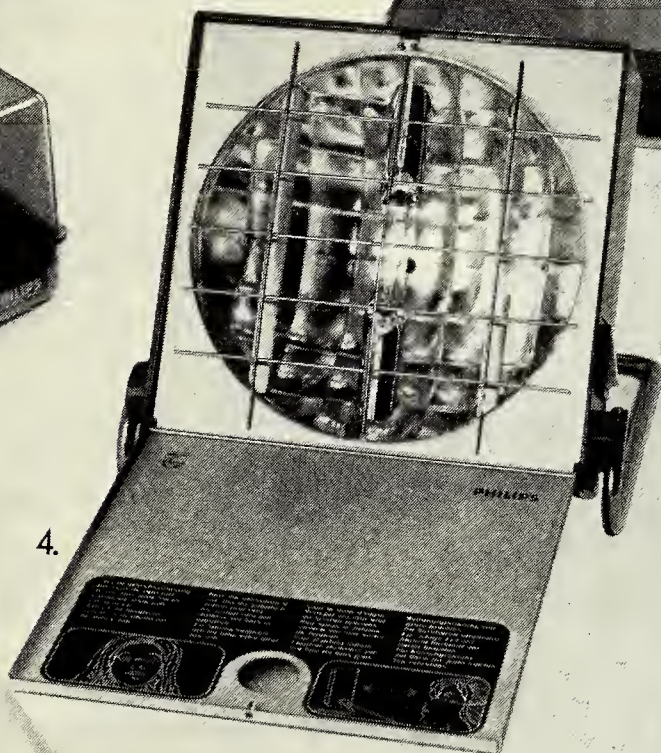
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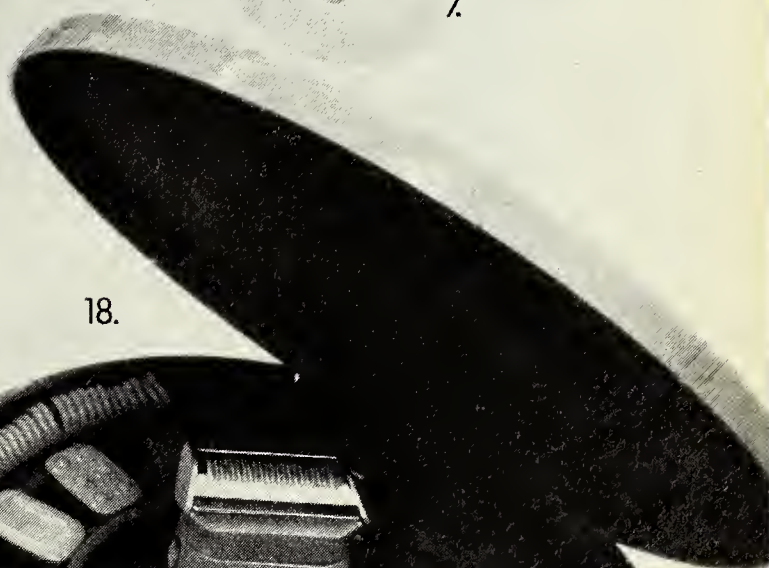
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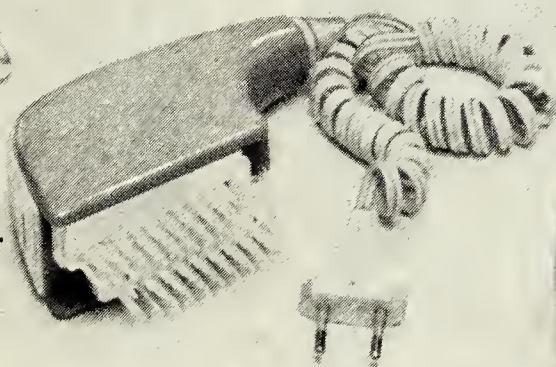
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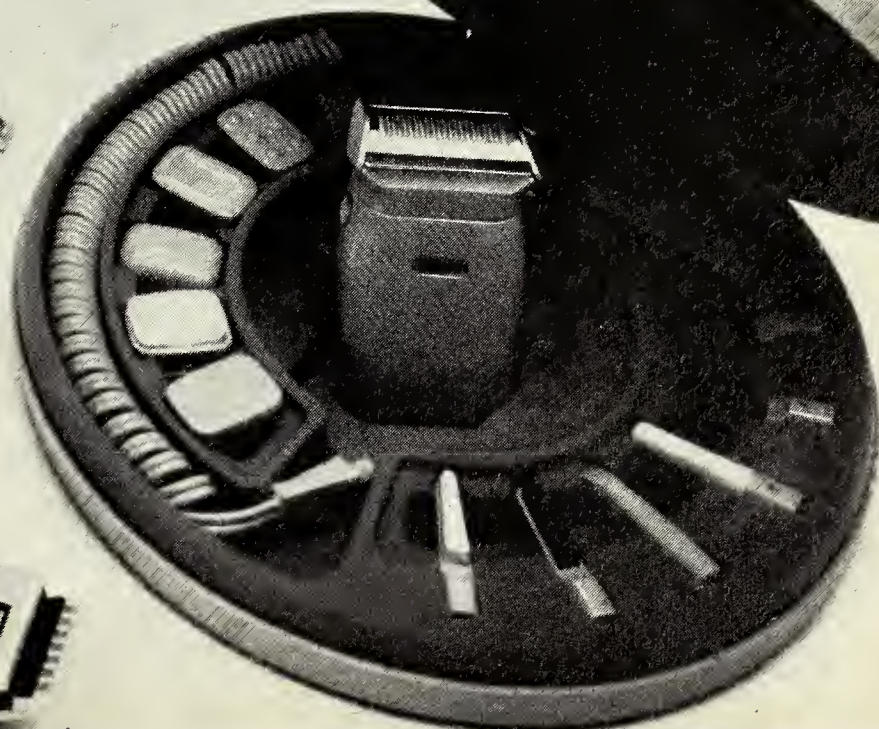


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A product difference has always been good for sales.

And Belle Blonde is the only hair lightener with this particular difference.

A booster.

This allows your customers to not only lighten their hair one shade but to lighten it to any intensity of blonde they want.

But probably more important to you is the fact that our little booster can actually save you valuable shelf space.

Because now, instead of having to stock a whole range of hair lighteners you only have to stock one.

Belle Blonde.

The only hair lightener that allows your customers to lighten their hair as much or as little as they want.

Hair colouring special

Women have been changing the colour of their hair for several thousand years. The reasons given are many—some flippant—but the impetus often comes from something fundamental.

There can be few things as boosting to a flagging morale than suddenly to receive a bevy of compliments and protestations of "something being different . . . but what?" after having given dull hair a subtle lift by the addition of highlights. Alternatively, for the more dramatically inclined, colouring can lead to a complete change of image.

Also, like all other beauty accessories, colourants are subject to the demands of fashion, immortalised by such films as "Gentlemen prefer blondes". The truth of that remark will always be open to argument, but there is no doubt that today's would-be blonde, brunette or redhead can go about her colouring with far greater feeling of security about the outcome than her predecessors, who often put both hair and scalp at considerable risk because of the materials used.

Enormous strides have been made in the formulation of colourants, so the element of risk is reduced to minimum. Of the million units sold over the counter every year, only a very few complaints of adverse effects are made, and those are usually due to the manufacturer's instructions not having been followed.

Yet, it is not only a case of colouring being a comparatively safe procedure, there are other formulation aspects. Although the term "conditioner" in itself is rather difficult to define, it is now true to say that all products marketed by leading companies leave the hair in as good a condition—if not better—than it was beforehand, through the combination or addition of various ingredients.

Nevertheless, it is still generally acknowledged by manufacturers and consumers alike that colourants and lighteners are among the most complex products that come into the realms of cosmetics and toiletries. It is, of course, the assistant's role to act as go-between in unravelling the "mysteries" so that the customer is always satisfied with the outcome . . . not an easy task. Therefore *Beauty Business* set out some time ago to ask the major hair colourant manufacturers to help in compiling what is intended to be the most comprehensive guide to selling these products.

The companies agreed and recently executives of Beecham, Clairol, Elida, Gillette, Inecto, L'Oreal, Poly and Wella met to discuss with us the whole subject of colouring the hair with preparations bought over chemists' counters and to attempt to sort out the areas of confusion that exist. The object was not to compile a learned manual, suitable only for the elite inner circle of a laboratory, rather to provide the assistant with a guide which can be used for quick reference (see table on pp20-23) at any time, whoever the customer and whatever her hair problem.



HAIR.....WHAT IT IS

Before exploring all the intricacies of colourants, it is necessary to define exactly what the hair is . . . It consists mainly of a protein called keratin, similar to nails, and has three layers, the cuticle, cortex and medulla. The CUTICLE, or protective outer layer, is composed of overlapping scales and is transparent, so allowing the colour to shine through from the CORTEX, where there is a series of closely packed cells housing the natural colour pigment. Right at the heart of the hair shaft is the spongy MEDULLA, which has little relevance to the subject in question and anyway is often absent from fine (usually fair) hair.

POROSITY

One word that should always be kept in the forefront of your mind when dealing with colouring and lightening is POROSITY, as this factor can make the difference between success and failure, particularly with the stronger types of product.

The term "porous" applies only to the cuticle of the hair and usually means that the scales have become damaged and opened so that any kind of liquid is more readily absorbed. The cause

might be over-lightening, perming, sunlight (particularly on wet hair), back-combing, or even overzealous use of a brush. Although hair with a weak cuticle can also be porous without suffering any maltreatment, it is more often due to external influences.

The problem is deciding whether a customer's hair is porous or not, and it may be comforting to know that this is sometimes even beyond the ability of a professional hairdresser. A guideline that may help you is that the ends of porous hair feel rough and look dull, while the frizzed up result of over-perming or a strawlike overlightened thatch speak for themselves. Excessive exposure to sunlight can be deduced from a tanned skin and intensely coloured hair on an older woman is probably tinted. These are clues and even if someone strongly denies ever having been near a colourant of any kind, but you suspect equally strongly that she has, do bear this in mind when recommending the strength of the product. In particular, steer her away from what, as you will see, we call maximum lighteners, even if she insists that shining yellow streak has been there since she was three!

The most usual effects of colouring porous hair can best be summed up by saying that whatever is intended will

turn out to be more extreme—whether it is the lighter or darker end of the spectrum. Other possibilities are that a temporary colourant can act like a semi-permanent, or a toner that has correctly been applied on top of a lightener can discolour (and at times even go green).

If you are ever confronted with a panicstricken colourific disaster, the most likely explanation is that as many colourants are made up of several dyes and some are more tenacious than others, the weaker ones are inclined to vanish out through the openings in the cuticle with the rinsing water, leaving the sturdier dyes to continue alone. On the other hand, with permanents, all the colour can lift much sooner than expected, despite having been more vivid initially, and the cause is exactly the same—the colour cannot hold inside the hair shaft. Semi-permanents and temporaries, however, have the opposite effect, as in this case, colour can build up, i.e. the hair absorbs more colour than either it or the product is meant to.

Porosity, incidentally, is not necessarily an all-over condition. It can affect only part of the hair which leads to colourants "taking" in patches.

Elida, Bristol-Myers, Gillette and L'Oreal experts pictured at the C&D conference

WHAT DO THEY ALL MEAN?

We started off our discussion with probably the most problematical point of all—what exactly all the various product descriptions mean—and met a stumbling block as soon as we reached semi-permanents. Looking for complete accord would be unrealistic, but more so that later. If in doubt, the tabulated product guide will give the answer to which is what as it corresponds to our descriptions here.

Let us begin at the beginning with...

TEMPORARY

These are designed to give extra depth to highlights to the natural colour and, as was unanimously agreed, last until the next shampoo only, with the proviso that colour could build up from one wash to the next on porous hair. Most temporaries are claimed just to coat the surface of the hair with colour.

SEMI-PERMANENT

Semi-permanents, as already mentioned, turned out to be rather a bone of contention and led to an hour and a half's lively discussion on this one point alone. The trouble seemed to be that the term "semi-permanent" is contradictory (the word permanent is absolute, so how can there be half measures?) and therefore open to different interpretations. As was pointed out, a new name is needed, so if you have any ideas to describe the same thing, we would be delighted to hear them.

We managed, however, to arrive at some sort of conclusion by dividing the category into two—traditional semi-permanents and stronger semi-permanents.

a) Traditional semi-permanents

These are designed to intensify the natural colour or to make a slight change of up to two or three shades, e.g. from light brown to dark brown, while anything more dramatic requires a permanent. The reason is that semi-permanents act on the hair by penetrating the cuticle and depositing the colour a little way inside the cortex so that it sits beside the natural colour pigment. Thus the result is a mingling of the natural and artificial colours and means that semi-permanents can never lighten. Lightening, as you will see in the section on the subject, means removing the

natural colour.) Normally, there is no regrowth problem as the artificial colour fades to blend in with the original as the hair grows. But there are exceptions to this rule... again, colour can build up on the treated part if the hair is excessively porous or if applications have been made more frequently than recommended. Also, if the tone of the hair has been changed radically, e.g. if red tones have been put in where there are none naturally, the tidemark could well show.

It is safe to assume that semi-permanents will last a minimum of four weeks, four to six being the average time span, taking into account the fact that the average consumer washes her hair somewhat more often than once a week (perhaps every four to five days). That is the general rule, but once the product and shade have been chosen, the exact claims of the manufacturers should be checked from the table and the packs as some express the "lastability" in terms of shampoos rather than weeks and other brands are slightly stronger and are said to last between six and eight weeks.

(b) Stronger semi-permanents

The main products in this category, Polycolor, Sea Witch and Melody, are intended to give some of the advantages of both the semi-permanent and permanent worlds. The factor placing them in this intermediate position is that they contain oxidation dyes—they penetrate the cortex further than a traditional semi-permanent and the oxidant (usually hydrogen peroxide) makes quite a marked colour transformation possible. Yet as the action is not very strong, the preparation doesn't last as long as a permanent, although a little longer than a traditional semi-permanent (approximately six to ten weeks). These products only add colour to hair, except for the four palest shades of Sea Witch (see table) which have a gentle lightening effect and are the most likely to lead to a regrowth problem.

PERMANENT

There was no problem in establishing what permanent colourants are all about. They penetrate the cortex completely, contain oxidation dyes (see above), can give a complete colour change and last until the coloured hair grows out. A slight fading will occur,



Nice 'n' Easy, a permanent shampoo-in colourant from Clairol was used in Natural Light Auburn on a medium brown base to give the hair a rich warm auburn look. Below, one of the four Hiltone Shaders from Beecham Products—a temporary shampoo-in toner especially for blonde or greying hair—has been used to add warm-coloured tones.

but the regrowth still needs attention about once a month, as approximately $\frac{1}{2}$ in of root will show by then. Most permanents nowadays are of the shampoo-in type and these don't lead to any colour build-up complications on the already treated section, because of their in-built "buffers" as they are described. However, with the brush-on type it is vital the preparation is applied only to the regrowth; if it is combed all the way through, there will certainly be colour build-up.

Two further points to remember—the shampoo-in types are not as strong in their effect as brush-on, so are likely to fade more during the growing-out process, and some permanents can lighten the hair by a few shades whereas others can most definitely not lighten at all, so do check this point carefully from the table.



LIGHTENERS



The same girl pictured above, but looking so much more attractive in the right-hand photograph. The model has naturally fair hair which has, at one time, been highlighted with blonde streaks—now growing out, leaving drab-coloured hair in rather poor condition. This hair has been treated with Recital Super Blonding Lightener first and then toned with Recital Helsinki (an ash blonde) both from the L'Oreal range

The subject of lighteners is not quite so complex as colourants as they all work on the same principle—the peroxide removes a proportion of the natural colour in the cortex (in the same way as permanents) the exact amount depending on the strength of the product. The difference is that whereas colourants leave in the hair an alternative colour to the one that has been eliminated, lighteners leave nothing (natural blonde is after all just the absence of colour). The variation between, for example, a platinum and an ash blonde comes partly from the natural hair colour, but mainly from the toner, which is really a colourant. Sometimes this is contained in the lightener but sometimes it is not, and should then be bought separately. The quickest way to tell whether a toner is included is if there is a choice of shades—if the answer is “yes” to that, it is also “yes” to the toner.

Where problems can arise with lighteners is in the varying strengths of the different products available on the market, so it was agreed at the meeting that they should be divided into three classifications, according to the number of shades they can “lift” the natural colour.

These are:

Gentle — 1-2 shades

Medium — 3-4 shades

Maximum — “as far as you want but stop before damage occurs”.

That could be the rule, but in more practical language, it means that these preparations can lighten all the way

from black to palest yellow, but should never be used to take the hair any further than six shades (e.g. brown to lightest blonde, see p. 19) because otherwise there is a grave danger of the hair being severely and irreparably damaged—some strands may even break.

Apart from the strength of the product, the effect achieved by any lightener does to a large extent depend on the length of time it is left on the hair (development time) and this in turn is affected by porosity—the more porous the hair, the quicker the lightener will work. But that is not to be confused with a separate application toner because this, as already mentioned (porosity section, page 8) may fade faster than expected from porous hair, or at least partially fade, leaving a rather weird colour or combination of colours. When treating regrowth, as with colourants, apply the brush-on types only to the roots.

Brassiness . . .

. . . is a common complaint from “lightened” customers and can be caused by a number of factors—the lightener has not been given sufficient development time; a toner has not been used when it was needed after a lightening-only product, or if a toner has been used, it has again not been left on the hair for long enough; a change has been made from one shade to another; a neutralising shade, such as platinum, has been applied to hair that

is not pale enough for it to make any difference.

Brassiness is in fact just the result of lightening hair that naturally has a lot of red and yellow pigment, so that when the other natural pigments (black and brown) are knocked out by the lightener the remainder is . . . a yellow-reddish brassy look. The best antidote is to apply an ash toner. Alternative methods of counteracting brassiness are to lighten first and then apply a toner, or use a colourant with a neutralising shade, but do be careful in these cases and refer to the section on INCOMPATIBILITIES first.

Regrowth

Although indications of the necessity or otherwise of treating regrowth have been given in the various sections, these are only generalisations. Whether the roots show or not does depend on how different the new colour is from the original, whatever category of product is involved. Even with a permanent, if the two colours are similar, the demarcation line may hardly be noticeable.

Colour won't take

If the complaint is that “after” looks exactly the same as “before”, apart from the obvious reason that the shade chosen was too much like the original, it could be that the hair was so greasy and/or over-lacquered that the colourant literally could not penetrate all the obstacles to reach its destination. A further cause may be excessive perspiration on the scalp.

Understanding the strand test

The strand test may seem at times to be an unnecessary time-waster, but that is far from the truth as those at the meeting took pains to emphasise. Many mistakes could be avoided if this simple trial-run on a small piece of hair were carried out according to instructions, as it takes much of the risk out of colouring and lightening by showing exactly the length of development time that is needed to achieve the desired result.

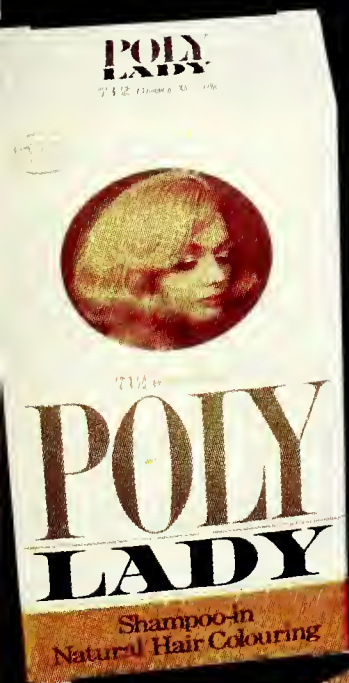
Although insisted upon as a preliminary only to the use of oxidation colourants (stronger semi-permanents and permanents) and lighteners, everyone present agreed that provided packaging allows, it is advisable every time for every type of preparation, no matter what the category. Apart from the practical aspects of the customer knowing exactly what she is getting, it should help psychologically by assuring her she will not turn up at “tomorrow's dance” looking like a perverted rainbow!

Not only should the test be done if colouring for the first time, it is also

Poly

all the beautiful ways a woman can
change the colour of her hair.

PolyLady - the easy-to-use
shampoo-in permanent.
For professional results
every time.
Recommended price 60p.



PolyColor - 13 beautiful
shades of semi-permanent
hair colouring.
Recommended price 36p



PolyTint - 10 shades of a
permanent cream colourant -
conditions while it colours.
Recommended price 43p.



PolyFair - a mild lightener
to brighten your natural
colour. Can be used on all
shades of hair.
Recommended price 37p.



PolyBlonde - 3 shades
of natural blonding cream -
conditions as it lightens.
Makes all shades of hair up
to three shades lighter.
Recommended price 37p.



PolyGlow - the
one-step way to
gently colour, condition
and shampoo the hair.
Recommended price 20p.

Every woman wants to make the most
of her hair - whether it's highlighting her
natural colour or changing the colour
completely. There's a Poly
hair colouring for any
change a woman wants.
Poly understands how
to make hair beautiful.



Did you know how big we are now?



The last four years have seen quite astonishing growth in the hair care market. But we've grown faster – much faster.

Last year, for instance, every one of our products

outperformed the national average.

Which means that a lot of retailers are making some nice profits with Wella.

Are you one of them?



The top name in hair beauty



WELLA ~we know about hair

Clairol -world professionals in hair care



Lighteners, continued from p10

vital if the customer (a) is changing from one brand of, for example, semi-permanent to another, as the slightly different formulations may not get on well together; (b) is switching from one category to another, e.g. semi-permanent to permanent or vice versa; or even (c) is changing from one shade to another as sometimes one brand will incorporate three or four different types of formulation to produce the range of shades.

Ignoring the strand test is particularly dangerous when it comes to porous hair, because the development time can vary so enormously. Although the timing is given by the manufacturers as a broad guideline, it must be taken with certain reservations in this instance, so always suggest that the customer starts off with a shorter length of time than recommended in the product leaflet. The method of performing the test is to

snip off a small piece of hair and apply a suitable quantity of the preparation in the same way as to the whole head. Most manufacturers recommend the hair should be taken from the nape of the neck although Gillette and Inecto say the crown of the head is preferable. But don't forget to give a gentle reminder that the cutting must be assessed in relation to the result "en masse", as the full quota is likely to look more startling than the isolated test piece.

As every manufacturer will testify, numerous women believe the strand test is so inaccurate that they send their test cutting along with a snipping from the finished product, insisting the two colours are completely different, whereas they are not, as laboratory analysis always shows.

A further point to remember is that if a colourant is being used to blend-in grey hairs, a representative sample of both the grey and natural colours must be taken.

INCOMPATIBILITIES

The poser of which colourants and lighteners can be applied on top of each other, if the customer wants to return to her natural colour or just to have a change, is fraught with if's and but's and threatened to keep the meeting in progress for at least a month. It would be impossible to cater for all contingencies here, so some general guidelines are set out below in four sections according to what may be required. It remains only to add that the utmost care must be taken whenever such a situation arises.

One lightener on top of another

Never in the case of maximum lighteners (except for treating regrowth), and although it is possible with gentle and medium preparations, the effect will be to make the shade even paler or brighter than it should be and to increase the damage and porosity, perhaps leading to hair breakage.

One colourant on top of another

If a temporary outlasts its allotted one shampoo, and another is applied, there will be a build-up of colour. The same occurs in the case of semi-permanents—if a further treatment is given before the first has faded enough, colour will build up.

Repeated applications of a permanent colour can increase the hair's sensitivity and even if the same shade is used consistently, the dark will go darker and the light lighter. Also without wishing to confuse, the darker the dark shade, the more build-up there will be,

owing to the higher concentration of tinting properties.

A lightener on top of a colourant

The first thing to say here is that it will have little, if any, effect, although it can lead to hair damage. There is, however, a difference between lightening the effect of a semi-permanent and lightening the effect of a permanent. Strange as it may seem, semi-permanents, if they have built up (particularly the dark shades, which again contain more colour), are more resistant to removal than permanents. But that doesn't mean permanents are without problems as they can throw up unwanted tones, especially harsh reds and yellows. If you cannot dissuade the customer from embarking on the exercise in the first place, it might be better to offer a hair dye reducer.

A colourant on top of a lightener

All colourants can be hazardous on lightened hair, which is why most manufacturers insist on a strand test first. Our conference participants were unable to agree even on which category of colourant was safest on lightened hair—it depends so much on the individual formulation. However, there are products, such as Melody, which give specific instructions for colouring lightened hair, and these may be the wisest choice when the customer has no particular product in mind. If she has, it's strand test every time.

Even with Melody, however, the advice is to go up one shade at a time towards the hair's natural colouring.



From the top down: Clairol have used Summer Blonde, a gentle lightener to lift the hair by three to four shades to give the hair a natural "sun-streaked look"; Hiltone Hair Lightener from Beecham Products was used to achieve this blonde shade; and bottom, Clairol have first pre-lightened with their Born Blonde Lightener then toned with Born Blonde Colourant in Intoxicating Ivory.



Shampoos

Talking of problems in removing colour, shampoos are a point to watch. Some, variants may be inclined to take the colour out faster than others. So if rapid fading gives rise to a moan from a customer, suggest she uses a milder preparation such as one designed for babies or one formulated specifically for colour-treated hair. BUT on the other hand, a stronger shampoo should not be recommended for the purpose of stripping colour, because as life often has it, these things don't work when asked.

Permanent waving

Like the strand test, the significance of perming in relation to colouring and lightening often passes unobserved. And it is important—there must be a time lag between the two.*

The order in which the two processes should take place is apparently one of the industry's "oldest chestnuts", but the consensus of opinion at the meeting was quite definitely to wave first and colour second. This is because although the colour may weaken the perm's bounce slightly, the reverse sequence can lead to a drastic colour loss, so perhaps starting a vicious circle by making it necessary to colour again.

The reason why they cannot both be done in one mammoth operation is that the perm makes the hair porous and the scalp sensitive, possibly causing skin irritation when colour is applied. Therefore, everything needs to return to normal before colouring, as this also can make the scalp sensitive and, of course, the hair porous.

It was agreed* (see footnote) that at least a week should elapse between waving and colouring and this should include one shampoo—both factors are vital. However, if the customer can bear to wait, it would be preferable to allow a lapse of two weeks including two shampoos, particularly in the case of stronger semi-permanents, permanents and lighteners. If she cannot bear to wait, she may find that colouring too soon after a perm leads to discolouration owing to some neutraliser having been left in the hair. This is because most colourants are basically alkaline and neutraliser contains acid—an unhappy combination.

Back to the "old chestnut" for a moment. When you suggest the "perm first, colour second" rule, a customer may tell you politely or not so politely that her hairdresser does the reverse. This is because a permanent wave can be adapted professionally to suit tinted hair more easily than the other way round but it would be difficult, or rather impossible, for a woman to undertake a sophisticated adaptation at home . . .



Before

What puts the colour in colourants is reminiscent of schooldays and elementary art lessons, because, as mentioned elsewhere, these preparations contain several different dyes. In fact, they originate from perhaps a surprising combination of the three primary colours, red, yellow and blue, and the three secondary colours, green, purple and orange. If you divide these into two, each has an opposite neutralising number—red neutralises green, yellow neutralises purple and blue neutralises orange. For example, red and green give chestnut; add orange and yellow and you get hazel.



After

Understanding the skin test

Manufacturers are legally compelled to print a cautionary warning to the effect that a skin or patch test should be carried out before applying any colourant that contains oxidation dyes. These preparations are listed as Part II poisons and are the ones you have to attach a shop address label to. Clairol, incidentally, print a similar warning on some other products, just as an added precaution.

It can never be overstated that the test should be made every time one of the products concerned is used, as it assures the customer she will not react adversely when it is applied to her head. She may think that once is enough, but it is



The girl in the top middle picture has natural, rather plain brown hair. To add more "life" and depth to her hair, she has used Ash Blonde from the Polylady permanent colourant range, bottom picture. □ The lady above has used Polycolor, Silver White shade, to add silver tones and cancel any yellow look to her naturally white hair

possible for an allergy to arise for no apparent reason, even if the same product has been used for a number of years, and it is not necessarily anything to do with a change in formulation.

The way to conduct the test is to place some of either the dye itself or a mixture of the two preparations on to the skin behind the ear or in the crook of the elbow. Then leave it to dry uncovered for at least 24 hours (Poly say 48 hours, just to be extra safe) and if no rash or irritation appears, go ahead. The reason you can apply either the dye on its own or a mixture of the two is that if anything is going to cause an allergy, it will more likely be the dye and not the oxidant, but to be absolutely sure, follow the instructions of the manufacturer.

*Inecto are the exception and state there need be no time lapse with their products.



**We give a little extra.
So you sell a little extra.**

Recital is the only leading hair colourant to include a special conditioning shampoo in every packet.

Recital gives you a whole new world of shining colour in 15 sophisticated shades at around 50p.

No wonder it sells so well.

Recital

BY L'OREAL, PARIS.

Watch the signs...starting next week

Casual sales are reaching for the stars

Biggest promotion ever in the history of CASUAL, bound to increase sales, starting next week.

From the brand leader in the permanent hair colour market. CASUAL combines high quality with colour range — 13 beautiful shades.

Women will want this special promotional offer (ask your rep for details next week — they're on the secret list till then) because it tells them vital secrets of beauty care and man-appeal in the most fascinating and popular way.

Your customers will read all the exciting details of this great promotion in major women's weekly and monthly magazines with impactful advertising to bring them buying.

You must stock and display

Casual to get the benefit of this important promotion. Special point-of-sale material is available — just ask your Gillette rep for details.

*Casual — a product of Gillette Industries Ltd.
Personal Care Division*



Casual
adds colour to
your sales

WHICH SHADES FOR WHOM?

The question of who should go what colour also proved to be something of a hot point at the meeting, the main problem being the discussion of the "shades", which can mean different things to different people.

L'Oreal's definition of the word goes from one to ten—lightest blonde,* very light blonde, light blonde, blonde, dark blonde, light brown, brown, dark brown, darkest brown, black, whereas Clairol covers the range with nine and call them colours, shades being the individual nuances that go on in between. (By the way, these apply to the hair's *natural* colouring.) Tones are yet something else, e.g. a brown shade can have either ash or coppery tones. Whether you call them "shades" or "colours", these ten are a good basis for discussing with your customer what she is after. One of the points to be remembered is that it is impossible to gauge the exact result—shade guides can only be approximate, because no two heads of hair are identical either in texture or in colour, so do take the precaution of mentioning this fact and make sure you know how each of the shade guides available work.

The skin tones of the customer should always be taken into account, so as a general rule, the fairer the skin, the fairer the colourant, which is after all, the way nature usually designs things. To be more precise, if your opinion is requested, advise that any more than three shades darker than the natural base colour could look harsh and unflattering, although a more dramatic change when lightening might be well acceptable. The choice of tones requires care because, for example, ash would not enhance a woman who has a sallow or dull skin—a warm coppery colourant could be much more suitable.

Porous hair also deserves special attention when selecting shades. Because it picks up colour so easily, it is wise to choose one or two shades lighter than the target.

Grey' hair

First we must establish that there is no such thing as grey coloured hair . . . "grey" is the term used to describe the

*White hair should be considered as lightest blonde on this scale.

overall effect of what in fact is the original colour interspersed with a number of white hairs. Shade guides often give an indication of the result achieved on "grey" hair, and the performance of many products in this instance vary, so again, refer to the table which tells you exactly the percentage of grey hair that can be covered or blended-in. When it comes to choosing shades for an older person who is turning white suggest something a bit lighter than she was originally because the skin becomes paler at the same time as the hair loses its colour. Never recommend red tones as they often come out orange.

"Can't do a thing with it . . . !"

Is a cry most often heard following an illness when the hair becomes lifeless, dull and generally out-of-condition. Perms, it is generally considered, do react differently at this time, but little research has been done to prove exactly what effect either illnesses, or the drugs that cure them, have on the application of colourants and lighteners. All that emerged from the meeting was that Inecto have carried out some work on the subject and claim there is no effect whatsoever, although L'Oreal say they have case histories to show that taking mineral supplements, such as iron, makes the scalp sensitive and sometimes leads to irritation, particularly if a lightener is used.

However, if a customer has a strange result from colouring following an illness, it should be a good idea to call the pharmacist who may suspect a link between the two. He in turn could inform the colourant manufacturer in question who would no doubt be glad to know.

Selling to the first-timer

The obvious recommendation to make to a first-timer is to use a temporary or a semi-permanent to see if she likes it before going on to braver enterprises. But is that always such a wise recommendation?

If she wants only a subtle change, that is fine, but if she has always had a hankering for something quite different (and is obviously not very impressed



An attractive silvery-grey shade for the older woman achieved by Clairol's semi-permanent hair colourant, Loving Care Silver, in the Silvery Pearl shade.

by the three shades either way idea) she will not be able to achieve it except by going the whole way at once. And if she won't do that, preferring to play it so-called safe, she is likely to be disappointed and swear never to colour her hair again—and you miss further sales.

When faced with this dilemma, consider the person standing the other side of the counter—her age, her personality, her affluence, or the lack of it (treating regrowths leads to further expense), and assess the most suitable step she should take and what you would be happy with if you were in her shoes.



That should cover all you need for selling colourants and lighteners confidently, without having to wade through a 100-page volume, which, as was pointed out, we could write on porosity alone.

You can be sure that everything stated here has been confirmed by all the manufacturers who gave us their help by participating in the meeting and that the general rules mentioned are applicable to all their products. If in doubt about the performance of the various sub-categories of preparations, such as colour setting lotions, refer to the table. Alternatively, you are welcome to send any queries about those or anything else either to us or to any of the advice bureaux run by the companies (see p23).

PRODUCT REFERENCE TABLE

Product	Maker	Lasting Quality	No. of Shades	Strand Test	Coverage of Grey Hair
TEMPORARY					
Color Set	Wella	Until next shampoo	9	With Beige Blonde shade when used on prelightened hair	Darker shades blend in
Hiltone Shaders	Beecham	Until next shampoo	4	No	All shades tint grey hair, especially smokey silver
Hint of a Tint	Inecto	Until next shampoo	6	No	None
PolySet	Poly	Until next shampoo	4		None
Streaks 'n Tips	Nestle	Until next shampoo	7	No	Blends in
Twice as Lasting	Roja	Until next shampoo	5	No	4 shades enhance totally grey

TRADITIONAL SEMI-PERMANENTS

Belle Argent	Roja	6-8 shampoos	2	No	Enhances grey
Born Blonde colourant	Bristol-Myers	4-6 shampoos	10	Yes	Not applicable
Color Glo	L'Oreal	6-8 shampoos	10	No	Rich brown sable, dark brown sable and black sapphire mask cover sprinkling of grey
Color Match	L'Oreal	6-8 shampoos	8	No	Masks up to 25% (specially for blending in grey hair)
Colortint	Nestle	4 shampoos	8	Yes for development time	Blends in
Focus Highlight	Gillette	4-6 shampoos	11	No	Shades 10 and 11 blend greying hair
Hair Magic	Inecto	6-8 shampoos	24	Yes	50%
Harmony	Elida	6-8 shampoos	12	No	15% average, more with darker shades
Loving Care	Bristol-Myers	4-6 shampoos	11	No	100%
Loving Care Silver	Bristol-Myers	4-6 shampoos	2	No	Enhances grey
Miners hair colour shampoo	Miners	4 shampoos	4	No	
PolyGlow	Poly	4-6 shampoos	6	Yes	Very small
Rimmel hair colourant shampoo	Rimmel	4 shampoos	10	No	

STRONGER (oxidation) SEMI-PERMANENTS

Melody	Elida	8-10 shampoos	8 (brown)	No	100%
PolyColor	Poly	6-8 weeks	13	Yes	25%
Sea Witch	Elida	8-10 shampoos	14	No	Varies with shade (see carton)

Method of Application	Lightening Effects	R.S.P.	Product
Used as a hairset	With Gently Light shade	16p	Color Set
Shampoo-in		8p	Hiltone shaders
Shampoo-on		7p	Hint of a Tint
Applied on dried hair		24p	PolySet
After setting		18p	
		10p	
Aerosol pack		46p	Streaks 'n Tips
Used as hairset		10p	Twice as Lasting
		25p	
Shampoo into damp hair		38p	Belle Argent
Shampoo-in on pre-dyed hair only	None	57p	Born Blonde colourant
Shampoo into damp hair		26p	Color Glo
Shampoo into damp hair		44p	Color Match
Shampoo-in	None	12p	Colortint
Shampoo-in	None	20p	Focus Highlight
Series; shampoo-in		28p	Hair Magic
Rush-on			
Shampoo-in		21p	Harmony
Shampoo into dry hair, worn during colour development	None	44p	Loving Care
Shampoo into dry hair polythene cap etc.	None	44p	Loving Care Silver
		15p or 23p	Miners hair colour shampoo
Shampoo-in	None	20p	PolyGlow
Shampoo-in		15p	Rimmel hair colourant shampoo
Shampoo-in from sator bottle (no pre-mixing)	None	40p	Melody
Shampoo-in	None	36p	PolyColor
Shampoo-in from sator bottle (no pre-mixing)	Four lightest shades have a gentle effect	34p	Sea Witch

Table continued overleaf



Courtesy of Poly

The participants in our symposium on hair colouring were:

- Beecham Products
Joanna Gibbons, public relations consultant
- Bristol Myers
Mr T. Harper, technical training manager
Susan Hart, public relations officer
- Elida Gibbs
Mr C. Millar, brand manager
Mr A. Clow, section manager (laboratory)
- Gillette
Mr M. Soltz, group brand manager
Mr A. Pond, research & development
- Inecto
Audrey Sibley, public relations officer
Mr Burton, chief chemist
- L'Oreal
Mr P. Cockett, chief product manager
Mr L. Dennell, technical director
Lynda Churcher, public relations officer
- Poly
Mr R. Eggleton, marketing services manager
- Wella
Renee Taylor, public relations consultant

“Enormous strides have been made in the formulation of colourants, so the element of risk is reduced to minimum. Of the million units sold over the counter every year, only a very few complaints of adverse effects are made, and those are usually due to the manufacturer’s instructions not having been followed”.

Product	Maker	Lasting Quality	No. of Shades	Strand Test	Coverage of Grey Hair	Shade Test
PERMANENTS						
Belle Color	Roja	Until new growth	18	Yes	100%	Yes
Casual permanent hair colour	Gillette	Until new growth	13	Yes	Darker shades 100%; lighter shades dependent on grey	Yes
Colorsilk	Revlon	Until new growth	21	Yes	Darker shades up to 100%	Yes
Inecto Colour Creme	Inecto	Until new growth	18	Yes	100%	Yes
Inecto Four-in-one	Inecto	Until new growth	11	Yes	50%	Yes
Nice'n Easy hair colour	Bristol-Myers	Until new growth	14	Yes	Darker shades blend in up to 100%; lighter up to 35%	Yes
PolyLady	Poly	Until new growth	12	Yes	Blends in small %	Yes
Polytint	Poly	Until new growth	10	Advisable	100%	Yes
Rapid	Inecto	Until new growth	18	Yes	100%	Yes
Recital	L'Oreal	Until new growth	15	Yes	100%	Yes
Tintette	L'Oreal	Until new growth	6	Yes	100%	Yes
Tried & True	Max Factor	Until new growth	14	Yes	100%	Yes

LIGHTENERS

Belle Blonde	Roja	Until new growth		Yes		No
Blondsilk lotion lightener	Revlon	Until new growth		Yes	None	Yes
Born Blonde lightener	Bristol-Myers	Until new growth		Yes		No
Casual hair lightener	Gillette	Until new growth		Yes		No
Hiltone	Beecham	Until new growth	2	Yes		No
Hi-lift	Inecto	Until new growth		No		No
Inecto Creme hair lightener	Inecto	Until new growth		No		No
Inecto Creme bleach	Inecto	Until new growth		No		No
L'Oreal hair bleach	L'Oreal	Until new growth		Yes		No
Nestle Lite	Nestle	Until new growth		Yes for timing	Blends in	Yes
Poly Blonde	Poly	Until new growth	3			
Poly fair	Poly	Until new growth	1			
PolySet lightening	Poly	Until new growth		No		No
Recital Super Blonding lightener	L'Oreal	Until new growth		Yes		No
Summer Blonde	Bristol-Myers	Until new growth		Yes		No
Sunnyside Up	Revlon	Until new growth	Yes	Yes	None	Yes
Tried & True California Blonde	Max Factor	Until new growth	6	Yes	Blends in	Yes
Twice as lasting	Golden	Until new growth	5	No	Shades enhance grey	No
Ultrasoft Blondes	Revlon	Until new growth	6	Yes	None	Yes
Wood Nymph	Elida	Until new growth	4	Yes		Yes

Method of Application	Lightening Effects	R.S.P.	Product
Put into damp hair with applicator	Up to 2 shades,	39p	Belle Color
Put in with applicator	Paler shades only	52p	Casual permanent hair colour
Put into dry hair	None	80p	Colorsilk
Put on		49p	Inecto Colour Creme
Application: Put in, then on		38½p	Inecto Four-in-one
Put in on dry hair	Good lightening action in blonde shades	56p	Nice 'n Easy hair colour
Put in	Depends on shade	60p	PolyLady
Put on	None	43p	Polytint
Put on		38½p	Rapid
Put into damp hair with applicator	Up to 2 shades depending on natural hair colour	50p	Recital
Put to damp hair with applicator sponge	None	50p	Tintette
Put into dry hair	None	75p	Tried & True
Put into dry hair with applicator	Gentle to medium	39p	Belle Blonde
Put in	Gentle to medium	95p	Blondsilk lotion lightener
Put with applicator	Maximum	66p	Born Blonde lightener
Put in with applicator	Gentle	52p	Casual hair lightener
Put on	Gentle	36p	Hiltone
Put on	Maximum	28p	Hi-lift
Put on	Gentle	25p	Inecto Creme hair lightener
Put on	Gentle	49p	Inecto Creme bleach
Put to dry hair with small brush	Gentle	29p	L'Oreal hair bleach
Mix and apply to hair		40p	Nestle Lite
Put on	Medium	37p	Poly Blonde
Put on	Gentle	37p	Polyfair
Put on towelled-dry before setting	Gentle	10p	Polysset lightening
Put into dry hair with applicator	Maximum	50p	Recital Super Blonding lightener
Put in	Gentle	47p	Summer Blonde
Put in	Gentle	£1.00	Sunnyside Up
	Medium	75p	Tried & True California Blonde
Use as hair set		10p, 25p	Twice as lasting
Put in	Medium	80p	Ultrasoft Blondes
Put in applicator bottle (no pre-mixing)	Medium (has built in toners)	54p	Wood Nymph

HAIR ADVISORY CENTRES

Clairol
Joan Clair Advisory Service
Stonefield Way
South Ruislip
Middlesex

Elida
Jane Lindsay
43 Portman Square
London W1A 1DY

Gillette
Evelyn Douglas
The Toni Hair Beauty Service
101 Syon Lane
Isleworth
Middlesex

Hiltone Advisory Bureau
Department M
Beecham House
Great West Road
Brentford
Middlesex

L'Oreal Hair Beauty Service
Monique Gerard
18 Bruton Street
London W1A 1BX

Nestle
Nancy Hewland & Associates Ltd
3 Grosvenor Street
London W1X 0BY

Poly
Anne Gordon Advisory Bureau
Chestnut Avenue
Eastleigh
Hampshire

Roja Hair Beauty Service
Clare Kendall
18 Bruton Street
London W1A 1BX

Inecto Advice Bureau
Inecto House
32 Dover Street
London W1X 3RA

Revlon
86 Brook Street
London W1

Rimmel
17 Cavendish Square
London W1

Wella
Annabelle Scott
Wella Road
Basingstoke
Hants

Yesterday things could have gone better.
So I treated myself to a Harmony hair colour.



Today's Harmony, with natural protein, is even richer. It's a complete beauty treatment for hair. Harmony shampoos, colours and conditions all in one. Use it like a cream shampoo, wait, then rinse. Couldn't be simpler, could it? Harmony brightens you up right away and the



rich glow lasts through 6 or so shampoos. Choose from 12 pretty colours. And see what happens.

Harmony Conditioning Hair Colour
with Natural Protein

Elida Paris · Vienna · London

